



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20461

DEC 23 1983

Mr. Mitch McConnell
P.O. Box 1496
Louisville, KY 40201

Dear Mr. McConnell:

This letter constitutes formal written notification that the McConnell Senate Committee filed a 1983 Mid-Year Report with the Commission and appears to be receiving contributions and/or making expenditures in support of your candidacy in excess of \$5,000. Commission regulations define a "candidate" as "... an individual who seeks nomination for election, or election, to Federal office, whenever any of the following events occur:

(1) The individual has received contributions aggregating in excess of \$5,000 or has made expenditures aggregating in excess of \$5,000.

(2) The individual has given his or her consent to another person to receive contributions or make expenditures on behalf of that individual and such person has received contributions aggregating in excess of \$5,000 or made expenditures aggregating in excess of \$5,000.

(3) After written notification by the Commission that any other person has received contributions aggregating in excess of \$5,000 or made expenditures aggregating in excess of \$5,000 on the individual's behalf, the individual fails to disavow such activity by letter to the Commission within 30 days receipt of the notification." (11 C.F.R. 100.3(a))

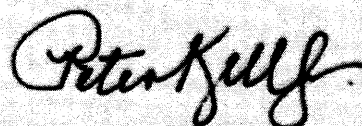
You have thirty days from receipt of this notification to disavow these activities. To disavow send a letter directly to the Commission at the above address, marked Attention: Reports Analysis Division, stating that you are not a candidate for Federal Office and that you have not authorized the solicitation of contributions nor the making of expenditures on your behalf.

If you do not disavow these activities, you should file a statement of candidacy (FEC Form 2) within 15 days of the date you become a candidate. (11 CFR 101.1(a))

0 0 3 2 9 0 1 5 7

If you have any further questions, please contact our Reports Analysis Division on the toll-free number (800) 424-9530. Our local number is (202) 523-4048.

Sincerely,



Peter Kell, Jr.
Chief, Authorized Branch
Reports Analysis Division

0 3 0 3 2 2 9 9 4 4 0 8

1/20/84

RECEIVED
SECRETARY OF THE SENATE
1984 JAN 24 PM 2:30
HAND DELIVERED ☒

C KY REP C1494

STATEMENT OF CANDIDACY

(see reverse side for instructions)

1. (a) Name of Candidate (in Full) Mitch McConnell	2. Identification No.
(b) Address (Number and Street) 1941 Bishop Lane, Suite 411	3. Party Affiliation Republican
(c) City, State and ZIP Code Louisville, Kentucky 40218	4. Office Sought United States Senate
	5. District & State of Candidate Kentucky

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

6. I hereby designate the following named political committee as my Principal Campaign Committee for the 1984 election(s).
(Year of Election)

NOTE: This designation must be filed with the appropriate office listed below.

(a) Name of Committee (in Full) McConnell Senate Committee
(b) Address (Number and Street) 1941 Bishop Lane, Suite 411
(c) City, State and ZIP Code Louisville, Kentucky 40218

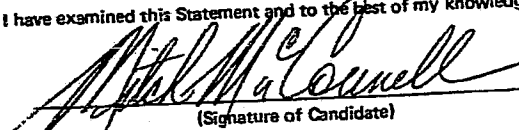
DESIGNATION OF OTHER AUTHORIZED COMMITTEES

7. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in Full)
(b) Address (Number and Street)
(c) City, State and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.


(Signature of Candidate)

1/19/84
(Date)

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

CANDIDATES FOR -
President mail to:

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

U.S. Senate mail to:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

U.S. House of Representatives
mail to:
Clerk of the House
1036 Longworth Office Bldg.
Washington, D.C. 20515

For further
information
contact:

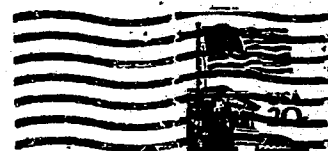
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

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FEC FORM 2 (3/80)

ch
McConnell
U.S. Senate

x 1496
e, Kentucky 40201



Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

8402001095

WILLIAM F. HILDENBRAND
SECRETARY

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

ALICIA RAE FISHER
SUPERINTENDENT

118 D STREET, N.E.
ROOM A-823
WASHINGTON, D.C. 20510
PHONE 202-224-0322

THE PRECEDING REPORT WAS RECEIVED: Jan. 20, 1984

 CERTIFIED

 REGISTERED

 FEDERAL EXPRESS

 EXPRESS MAIL

8402110960

STATEMENT OF CANDIDACY

(see reverse side for instructions)

RECEIVED
CLERK OF THE SENATE

1984 MAY 17 PM 1:20

1. (a) Name of Candidate (in Full) <u>Mitch McConnell</u>	2. Identification No. <u>1984 MAY 17 PM 1:20</u>
(b) Address (Number and Street) <u>1941 Bishop Lane, Suite 411</u>	3. Party Affiliation <u>Republican</u>
(c) City, State and ZIP Code <u>Louisville, Kentucky 40218</u>	4. Office Sought <u>United States Senate</u>
	5. District & State of Candidate <u>Kentucky</u>

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

6. I hereby designate the following named political committee as my Principal Campaign Committee for the 1984 election(s).
(Year of Election)

NOTE: This designation must be filed with the appropriate office listed below.

(a) Name of Committee (in Full) <u>McConnell Senate Committee</u>
(b) Address (Number and Street) <u>1941 Bishop Lane, Suite 411</u>
(c) City, State and ZIP Code <u>Louisville, Kentucky 40218</u>

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

7. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in Full)
(b) Address (Number and Street)
(c) City, State and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Mitch McConnell 5-15-84
(Signature of Candidate) (Date)

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

CANDIDATES FOR —

President mail to:

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

U.S. Senate mail to:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

U.S. House of Representatives
mail to:

Clerk of the House
1036 Longworth Office Bldg.
Washington, D.C. 20515

For further
information
contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-623-4068

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FEC FORM 2 (3/80)

84020110097

84020110098

RECEIVED LIBRARY OF THE SENATE

~~1904 DEC 11 AM 2 04~~

~~HAND DELIVERED~~

1990

(Year of Election)

FEC FORM 2 (3/80)

84020300509

STATEMENT OF ORGANIZATION

(see reverse side for instructions)

1. (a) Name of Committee (in Full) McConnell Senate Committee '90	<input type="checkbox"/> Check if name or address is changed.	2. Date December 14, 1984
(b) Address (Number and Street) P. O. Box 1496		3. FEC Identification Number 1984-DEC 17 PM 2:04
(c) City, State and ZIP Code Louisville, Kentucky 40201		4. Is this an amended statement? NO

5. TYPE OF COMMITTEE (check one).

- ☒ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|---|--|-------------------------------------|-----------------------------|
| Mitch McConnell
Name of Candidate | Republican
Candidate Party Affiliation | U.S. Senate
Office Sought | KY
State/District |
|---|--|-------------------------------------|-----------------------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund nor a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

If the registering political committee has identified a "connected organization" above, please indicate type of organization:

- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number — optional) and position, the person in possession of committee books and records.

Full Name	Mailing Address and ZIP Code	Title or Position
Larry J. Steinberg	c/o Touche Ross & Co. 510 W. Broadway, Louisville, KY 40202	Treasurer

8. Treasurer: List the name and address (phone number — optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address and ZIP Code	Title or Position
Larry J. Steinberg	c/o Touche Ross & Co. 510 W. Broadway Louisville, KY 40202	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
Liberty National Bank	P. O. Box 32500 Louisville, KY 40232

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Larry J. Steinberg

Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

December 14, 1984

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

For further information contact:

Federal Election Commission, Toll Free 800-424-9530, Local 202-523-4068

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FEC FORM 1 (3/80)

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

☐ INSIDE MAIL

 Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

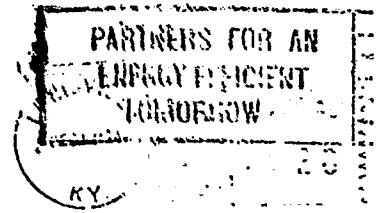
Dec. 14, 1984

 AND OR DATE OF RECEIPT

84729300511

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Public Record

*Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510*

9452909513

S-3153

REPORTS OF RECEIPTS AND DISBURSEMENTS For Authorized Committee

KY REP C 1494

(Summary Page)

RECEIVED.
SECRETARY OF THE SENATE

ALIGN AREA

1. Name of Committee (in Full)
McConnell Senate Committee2. FEC Identification Number
C00155051

Address (Number and Street)

P. O. Box 1496

City, State and Zip Code

Louisville, KY 40201

☐ Check if address is different than previously reported.

3. Is this Report an Amendment?

☐ YES☒ NOHAND DELIVERED ☐

4.

TYPE OF REPORT

☐ April 15 Quarterly Report☐ Twelfth day report preceding _____
(Type of Election)☐ July 15 Quarterly Report

election on _____ in the State of _____

☐ October 15 Quarterly Report☐ Thirtieth day report following the General Election on _____☒ January 31 Year End Report

in the State of _____

☐ July 31 Mid Year Report (Non-election Year Only)☐ Termination Report

This report contains activity for —

☒ Primary Election☒ General Election☐ Special Election☐ Runoff Election

SUMMARY

5. Covering Period July 1, 1983 through December 31, 1983

COLUMN A
This PeriodCOLUMN B
Calendar Year-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (From Line 11 (e))

154,958

346,564

(b) Total Contribution Refunds (from Line 20 (d)).

4,000

4,000

(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))

150,958

342,564

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17).

147,024

185,613

(b) Total Offsets to Operating Expenditures (from Line 14).

147,024

185,613

(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a)).

390,711

8. Cash on Hand at Close of Reporting Period (from Line 27)

9. Debts and Obligations Owed TO The Committee
(Itemize all on Schedule C or Schedule D)

10. Debts and Obligations Owed BY The Committee
(Itemize all on Schedule C or Schedule D)

166,229

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg

Type or Print Name of Treasurer

SIGNATURE OF TREASURER

January 31, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

94020030101

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full) McConnell Senate Committee		Report Covering the Period: From: July 1, 1983 To: December 31, 1983	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees	131,988	321,344	11 (a)
(Memo Entry Unitemized \$ <u>25,741</u>)			
(b) Political Party Committees	15,120	15,120	11 (b)
(c) Other Political Committees	7,850	10,100	11 (c)
(d) The Candidate			11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).	154,958	346,564	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13 (a)
(b) All Other Loans			13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b)).			13 (c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	14,445	24,174	15
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)	169,403	370,738	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	147,024	185,613	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19 (a)
(b) Of All Other Loans			19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b))			19 (c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	1,000	1,000	20 (a)
(b) Political Party Committees			20 (b)
(c) Other Political Committees	3,000	3,000	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))	4,000	4,000	20 (d)
21. OTHER DISBURSEMENTS	3,000	3,000	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)	154,024	192,613	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	375,332	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$	169,403	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$	544,735	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$	154,024	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	390,711	27

84020030102

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036	76,000	54,795	59,454	71,341
Nature of Debt (Purpose): Media & campaign consulting & production				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	1,906	428	2,334	---
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shively Newsweek, Inc. 4939 Dixie Highway Shively, KY 40216	703	896	1,599	---
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202	1,424	5,254	6,678	---
Nature of Debt (Purpose): Computer programming and services				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	---	24,035	1,763	22,272
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 E. Market Street Louisville, KY 40202	---	655	121	534
Nature of Debt (Purpose): Office Supplies				
1) SUBTOTALS This Period This Page (optional)				94,147
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

94020030103

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Assos., Inc. 7316 Wisconsin Avenue, Suite 507 Bethesda, MD 20814	---	78,961	14,961	64,000
Nature of Debt (Purpose): Promotional mailing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Blvd. Louisville, KY 40299	---	9,218	1,136	8,082
Nature of Debt (Purpose): Office equipment rental & purchase				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				72,082
2) TOTAL This Period (last page this line only)				166,229
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				166,229

84020030104

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 22 for
LINE NUMBER 11 A
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Dr. Irvin Abell, Jr. Mockingbird Valley Road Louisville, KY 40207		Name of Employer Self	Date (month, day, year) 12-01-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Doctor	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. R. S. Adams P. O. Box 99615 Louisville, KY 40299		Name of Employer Mover Packaging,	Date (month, day, year) 7-06-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation President	Amount of Each Receipt This Period \$500.00
		Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Mr. James G. Apple 2942 Lexington Road Louisville, KY 40206		Name of Employer Self	Date (month, day, year) 12-06-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney	Amount of Each Receipt This Period \$300.00
		10-24-83 \$200.00	
		Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Joseph L. T. Ardery 97 Warrior Road Louisville, KY 40207		Name of Employer None	Date (month, day, year) 12-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Homemaker	Amount of Each Receipt This Period \$500.00
		Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Charles W. Arnold, Jr. 13905 Harbor View Court Prospect, KY 40059		Name of Employer A. Arnold & Son	Date (month, day, year) 7-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation President	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Frank H. Arnold, Sr. 1521 Sylvan Court Louisville, KY 40205		Name of Employer Prudential Heating & Air	Date (month, day, year) 12-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation President	Amount of Each Receipt This Period \$50.00
		Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Asenah Averyt P. O. Box 1365 Columbia, SC 29202		Name of Employer Self	Date (month, day, year) 12/27/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Investments	Amount of Each Receipt This Period \$500.00
		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional).....			\$4050.00
TOTAL This Period (last page this line number only)			

94020030105

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 22 for
LINE NUMBER 11 A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Thomas K Baer 1816 Knollwood Road Louisville, KY 40207	Name of Employer None	Date (month, day, year) 12-30-83	Amount of Each Receipt this Period \$1000.00
	Occupation Homemaker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 1000.00		
B. Full Name, Mailing Address and ZIP Code Mr. Bernard H. Barnett 1615 31st Street Washington, DC	Name of Employer Barnett & Alagia	Date (month, day, year) 7-08-83	Amount of Each Receipt This Period \$1000.00
	Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Mr. Cecil Clyde Barnett 318 Mockingbird Valley Road Louisville, KY 40207	Name of Employer Tube Turns	Date (month, day, year) 12-08-83 12-12-83	Amount of Each Receipt This Period \$350.00 \$1000.00
	Occupation Executive		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Aggregate Year-to-Date-\$1850.00		
D. Full Name, Mailing Address and ZIP Code Mr. Gilliam H. Barnett 318 Mockingbird Valley Road Louisville, KY 40207	Name of Employer	Date (month, day, year) 12/09-83	Amount of Each Receipt This Period \$500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 700.00		
E. Full Name, Mailing Address and ZIP Code Mr. John W. Barr III 16 River Hill Road Louisville, KY 40207	Name of Employer First National	Date (month, day, year) 11-22-83	Amount of Each Receipt This Period \$500.00
	Occupation Banker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 500.00		
F. Full Name, Mailing Address and ZIP Code Mr. Jerry Barton 1103 Evergreen Road Louisville, KY 40223	Name of Employer Belknap, Inc.	Date (month, day, year) 12/28/83	Amount of Each Receipt This Period \$250.00
	Occupation President		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 250.00		
G. Full Name, Mailing Address and ZIP Code Mr. John Bickel 2906 Cheyenne Drive Owensboro, KY 42301	Name of Employer Self	Date (month, day, year) 12-12-83	Amount of Each Receipt This Period \$250.00
	Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 250.00		
SUBTOTAL of Receipts This Page (optional).....			\$4850.00
TOTAL This Period (last page this line number only)			

64020030106

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A

(Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. R. C. Billips Box 2666 Pikeville, KY 41501	Peter Fork Mining	12-01-83	\$925.00
	Occupation Coal Mine Oper.	12-01-83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1925.00	
B. Full Name, Mailing Address and ZIP Code Mrs. R. C. Billips Box 2666 Pikeville, KY 41501	None	12-01-83	\$1000.00
	Occupation Homemaker	12-01-83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$2000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Allen Blacketer 816 Rugby Place Louisville, KY 40222	self	12-28-83	\$800.00
	Occupation Builder	12-28-83	\$700.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1500.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Joann Blacketer 816 Rugby Place Louisville, KY 40222	Self	12-28-83	\$800.00
	Occupation Realtor	12-28-83	\$700.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Hilary Boone 1725 Walnut Hill Road Lexington, KY 40503	Wimbledon Farm	12-08-83	\$1000.00
	Occupation Horse Breeder		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$1000.00	
F. Full Name, Mailing Address and ZIP Code Dr. Herb R. Booth 7621 Dixie Highway Florence, KY 41042	Self	12-30-83	\$900.00
	Occupation Doctor	12-30-83	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1100.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Marion L. Caperton 3114 Boxhill Court Louisville, KY 40222	None	12/23/83	\$500.00
	Occupation Homemaker	12-23-83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1000.00	
SUBTOTAL of Receipts This Page (optional)			\$9925.00
TOTAL This Period (last page this line number only)			

84020030107

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 22 for
LINE NUMBER 11 A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Frank L. Carney 302 N. Rock Road Wichita, KS 67206		Self	12/27/83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen		Occupation Investments	12/27/83	\$1000.00
Aggregate Year-to-Date-\$ 2000.00				
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Stephen C. Casagrande 2800 Juniper Hill Court Louisville, KY 40206		Touche Ross	9-14-38	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation CPA		
Aggregate Year-to-Date-\$ 500.00				
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harold W. Cates 7 Arrowhead Road Louisville, KY 40207		Self	12-23-83	\$800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Real Estate		
Aggregate Year-to-Date-\$ 1800.00				
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard Clay 404 Sprite Road Louisville, KY 40207		Woodward, Hobson & Fulton	11-15-83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney		
Aggregate Year-to-Date-\$ 500.00				
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Polly Z. Cochran 25 Stone Bridge Road Louisville, KY 40207		None	12-28-83	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Retired		
Aggregate Year-to-Date-\$ 300.00				
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Terrell Coleman Box 2009 Pikeville, KY 41501		Self	11-22-83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Oil Distributor	11-22-83	\$1000.00
Aggregate Year-to-Date-\$ 2000.00				
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George H. Collins 4 Overbrook Road Louisville, KY 40207		The Collins Company	7-18-83	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation President	8-10-83	\$250.00
Aggregate Year-to-Date-\$ 1000.00				
SUBTOTAL of Receipts This Page (optional)				\$6600.00
TOTAL This Period (last page this line number only)				

84020030108

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Dudley Conner, Sr. 6431 Regency Lane Louisville, KY 40202		Name of Employer Self	Date (month, day, year) 12-14-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Insurance	Amount of Each Receipt This Period \$250.00
		Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Dr. Larry N. Cook 2011 Woodford Place Louisville, KY 40205		Name of Employer Self	Date (month, day, year) 7-6-83 7-6-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Doctor	Amount of Each Receipt This Period \$200.00 \$ 50.00
		Aggregate Year-to-Date-\$550.00	
C. Full Name, Mailing Address and ZIP Code Mrs. Lucy Dabney Mockingbird Valley Louisville, KY 40207		Name of Employer None	Date (month, day, year) 12-23-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Homemaker	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$1000.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Patricia Dabney Mockingbird Valley Louisville, KY 40207		Name of Employer None	Date (month, day, year) 12-27-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Homemaker	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Gordon B. Davidson 435 Lightfoot Road Louisville, KY 40207		Name of Employer Wyatt, Tarrant & Combs	Date (month, day, year) 12-30-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney	Amount of Each Receipt This Period \$230.40
		Aggregate Year-to-Date-\$230.40	
F. Full Name, Mailing Address and ZIP Code Mr. Shelby Cullom Davis 70 Pine Street New York, NY 10005		Name of Employer Shelby Cullom & Davis & Co.	Date (month, day, year) 12-12-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Investments	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Ivan M. Diamond 4604 Deepwood Court Louisville, KY 40202		Name of Employer Greenebaum, Doll &	Date (month, day, year) 11-23-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney	Amount of Each Receipt This Period \$400.00
		Aggregate Year-to-Date-\$ 400.00	
SUBTOTAL of Receipts This Page (optional).....			\$3,630.40
TOTAL This Period (last page this line number only).....			

94020030109

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Fritz W. Drybrough, Jr.
1003 Alta Circle
Louisville, KY 40205

Name of Employer

Self

Date (month,
day, year)
12-30-83

Amount of Each
Receipt This Period
\$500.00

Occupation

Real Estate

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Larry Ethridge
2402 Longest Avenue
Louisville, KY 40204

Name of Employer

Self

Date (month,
day, year)
12/30/83

Amount of Each
Receipt This Period
\$250.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Mr. Lem Evans
Livermore
Kentucky 42353

Name of Employer

B. F. Evans Ford

Date (month,
day, year)
9-12-83

Amount of Each
Receipt This Period
\$500.00

Occupation

Car Dealer

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Richard Evans
517 Maple Avenue
Owensboro, KY 42301

Name of Employer

B. F. Evans Ford

Date (month,
day, year)
9-12-83

Amount of Each
Receipt This Period
\$500.00

Occupation

Car Dealer

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Fletcher F. Farrar
P. O. Box 747
Mt. Vernon, IL 62864

Name of Employer

Self

Date (month,
day, year)
12-22-83

Amount of Each
Receipt This Period
\$1000.00

Occupation

Investments

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Barbara C. Ferguson
1006 Doric Circle
Louisville, KY 40205

Name of Employer

None

Date (month,
day, year)
12-22-83

Amount of Each
Receipt This Period
\$1000.00

Occupation

Homemaker

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Bruce L. Ferguson
1006 Doric Circle
Louisville, KY 40205

Name of Employer

Underwriters Safety
and Claims, Inc.

Date (month,
day, year)
12-22-83

Amount of Each
Receipt This Period
\$1000.00

Occupation

President

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$1000.00

SUBTOTAL of Receipts This Page (optional)

\$4750.00

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Charles J. Fisher, Sr. Route 2, Box 6307 Prospect, KY 40059		Reliance Universal	12-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation President	12-28-83
		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Michael M. Fleishman 4107 Woodstone Way Louisville, KY 40222		Greenebaum Doll & McDonald	12-30-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney	
		Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Duffy Ford Route 5, Box 328 Richmond, KY 40475		Amick & Helm	12-05-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation CPA	
		Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205		Self	9-16-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Doctor	12-15-83
			9-16-83
		Aggregate Year-to-Date-\$ 625.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Thomas J. Gillespie 3004 Rexford Way Louisville, KY 40205		Technical Products	7-03-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation President	
		Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Dr. Ronald G. Goebel 903 Evergreen Road Louisville, KY 40223		Humana	12-01-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Doctor	
		Aggregate Year-to-Date-\$ 300.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mrs. Eleanor A. Goldberg 7306 Shadwell Lane Prospect, KY 40059		None	7-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Homemaker	12-30-83
		Aggregate Year-to-Date-\$ 2000.00	
SUBTOTAL of Receipts This Page (optional)			\$4225.00
TOTAL This Period (last page this line number only)			

84020030111

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Patrick H. Gorman 4300 Talahi Way Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 11-15-83	Amount of Each Receipt This Period \$1000.00
	Occupation Realtor		
	Aggregate Year-to-Date-\$1000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
B. Full Name, Mailing Address and ZIP Code Mr. George Greer 1827 Fieldcrest Drive Owensboro, KY 42301	Name of Employer Greer W H Supply	Date (month, day, year) 12-12-83	Amount of Each Receipt This Period \$250.00
	Occupation Owner		
	Aggregate Year-to-Date-\$250.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
C. Full Name, Mailing Address and ZIP Code Mr. W. R. Griffin 106 Skyline Drive London, KY 40741	Name of Employer	Date (month, day, year) 12-06-83	Amount of Each Receipt This Period \$1000.00
	Occupation	12-06-83	
	Aggregate Year-to-Date-\$ 2000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.			
D. Full Name, Mailing Address and ZIP Code Mrs. Miles Haman Charleston Apts. #305 Paducah, KY 42001	Name of Employer None	Date (month, day, year) 8-05-83	Amount of Each Receipt This Period \$20.00
	Occupation Homemaker	11-18-83	
	Aggregate Year-to-Date-\$540.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
E. Full Name, Mailing Address and ZIP Code Mr. Floyd T. Hensley, Jr. Route 3 Box 348 Campbellsville, KY 42718	Name of Employer Taylor County Bank	Date (month, day, year) 12-9-83	Amount of Each Receipt This Period \$100.00
	Occupation Banker		
	Aggregate Year-to-Date-\$600.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
F. Full Name, Mailing Address and ZIP Code Mr. Henry V. Heuser 2505 Poplar Crest Road Louisville, KY 40207	Name of Employer Henry Vogt Machine Company	Date (month, day, year) 12-30-83	Amount of Each Receipt This Period \$500.00
	Occupation President		
	Aggregate Year-to-Date-\$ 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
G. Full Name, Mailing Address and ZIP Code Mr. William Heyburn, II 4 Woodhill Road Louisville, KY 40207	Name of Employer Mutual of New York	Date (month, day, year) 12-20-83	Amount of Each Receipt This Period \$250.00
	Occupation Insurance Underwriter		
	Aggregate Year-to-Date-\$250.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
SUBTOTAL of Receipts This Page (optional)			\$4620.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. James G. Hobbs Box 752 Pikeville, KY 41501		Name of Employer R. H. Hobbs Co. Occupation Merchant	Date (month, day, year) 12-15-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General		Amount of Each Receipt This Period \$500.00	
		Aggregate Year-to-Date-\$500.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Frank B. Hower, Jr. 399-A Mockingbird Valley Louisville, KY 40207		Name of Employer None Occupation Homemaker	Date (month, day, year) 12-30-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Amount of Each Receipt This Period \$500.00	
		Aggregate Year-to-Date-\$500.00	
C. Full Name, Mailing Address and ZIP Code Mr. David L. Huber 2335 Village Drive Louisville, Ky 40205		Name of Employer Jefferson County Government Occupation CEO	Date (month, day, year) 10-03-83 11-11-83 11-11-83 12-16-83 12-29-83 12-06-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Amount of Each Receipt This Period \$140.00 \$110.00 \$125.00 \$135.00 \$100.00 \$140.00	
		Aggregate Year-to-Date-\$1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059		Name of Employer Self Occupation Auto Dealer	Date (month, day, year) 12-30-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Amount of Each Receipt This Period \$250.00	
		Aggregate Year-to-Date-\$500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Norman P. Iler 2402 Grey Fox Road Louisville, KY 40205		Name of Employer Creasy Co. Occupation Chrmn. of the Board	Date (month, day, year) 12-28-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Amount of Each Receipt This Period \$250.00	
		Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Ms. Kate Ireland Wendover Kentucky 41775		Name of Employer Frontier Nursing Service Occupation Director	Date (month, day, year) 11-23-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Amount of Each Receipt This Period \$1000.00	
		Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. William P. Jackson 1208 Colonial Drive Lexington, KY 40504		Name of Employer Winmare Corp. Occupation Businessman	Date (month, day, year) 12-19-83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Amount of Each Receipt This Period \$500.00	
		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			\$3750.00
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Baylor Landrum, Jr 3729 Fairway Lane Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 9-27-83	Amount of Each Receipt this Period \$250.00
	Occupation Executive	12-06-83	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Harry Klein 3818 Washington Square Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 12-14-83	Amount of Each Receipt This Period \$500.00
	Occupation Consultant		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$500.00	
C. Full Name, Mailing Address and ZIP Code Dr. Harold F. Kleinert Route 2 Ckarlestown, IN 4711	Name of Employer Self	Date (month, day, year) 7-18-83	Amount of Each Receipt This Period \$250.00
	Occupation Doctor		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Sammie F. Lee 5801 Apache Road Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 7-08-83	Amount of Each Receipt This Period \$250.00
	Occupation Engineer	12-30-83	\$ 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$300.00	
E. Full Name, Mailing Address and ZIP Code Mr. Lawrence Leis 2928 Field Avenue Louisville, KY 40206	Name of Employer Louis & Henry	Date (month, day, year) 12-05-83	Amount of Each Receipt This Period \$1000.00
	Occupation Architect	12-05-83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$2000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Robert F. Linton P. O. Box 111 Pikeville, KY 41501	Name of Employer Self	Date (month, day, year) 11-22-83	Amount of Each Receipt This Period \$1000.00
	Occupation CPA	11-22-83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$2000.00	
G. Full Name, Mailing Address and ZIP Code Mr. William F. Lucas 18 Indian Hills Trail Louisville, KY 40207	Name of Employer None	Date (month, day, year) 12-30-83	Amount of Each Receipt This Period \$500.00
	Occupation Retired		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$500.00	
SUBTOTAL of Receipts This Page (optional):			\$6050.00
TOTAL This Period (last page this line number only)			

94020030114

SCHEDULE A

ITEMIZED RECEIPTS

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Summary Page)

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Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. T. D. Lockett, II 425 Lightfoot Road Louisville, KY 40207	Name of Employer None	Date (month, day, year) 11-22-83	Amount of Each Receipt this Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Retired		
	Aggregate Year-to-Date—\$250.00		
B. Full Name, Mailing Address and ZIP Code Mr. Samuel S. Mansbach P. O. Box 1179 Ashland, KY 41101	Name of Employer Self	Date (month, day, year) 11-28-83	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Owner		
	Aggregate Year-to-Date—\$ 700.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
	Aggregate Year-to-Date—\$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			\$200.00
TOTAL This Period (last page this line number only)			

84020030115

SCHEDULE A

ITEMIZED RECEIPTS

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Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Susan G. Musson 306 Hillcrest Louisville, KY 40206	Name of Employer None	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$1000.00
	Occupation Homemaker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Frank Newman 750 S. Ocean Blvd., #16S Boca Raton, FL 33432	Name of Employer Self	Date (month, day, year) 12/14/83 12-14-83	Amount of Each Receipt This Period \$1000.00 \$1000.00
	Occupation Investments		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General		Aggregate Year-to-Date-\$ 2000.00	
C. Full Name, Mailing Address and ZIP Code Mr. John M. Nichols 700 Blankenbaker Lane Louisville, KY 40207	Name of Employer Coopers & Lybrand	Date (month, day, year) 12/28/83 12-28-83	Amount of Each Receipt This Period \$250.00 \$250.00
	Occupation Accountant		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$ 1250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Henry D. Ormsby, III 521 Country Lane Louisville, KY 40207	Name of Employer First National Bank	Date (month, day, year) 11/28/83	Amount of Each Receipt This Period \$250.00
	Occupation Banker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Ms. Diane W. Parker 911 St. Georges Road Baltimore, MD 21210	Name of Employer Self Employed	Date (month, day, year) 12/5/83	Amount of Each Receipt This Period \$1000.00
	Occupation Investments		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. S. Tilford Payne, Jr. 2514 Poplar Crest Road Louisville, KY 40207	Name of Employer Self Employed	Date (month, day, year) 12/28/83	Amount of Each Receipt This Period \$500.00
	Occupation Investments		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Kathleen Peck P.O. Box 130 Russell Springs, KY 42539	Name of Employer None	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$500.00
	Occupation Homemaker		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			\$5750.00
TOTAL This Period (last page this line number only)			

84020030117

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER **11 A**
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. Mark S. Pitt 217 Cambridge Station Road Louisville, KY 40223		Name of Employer Wyatt, Tarrant & Combs	Date (month, day, year) 12/30/83	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney	12/30/83	\$ 34.62
		Aggregate Year-to-Date-\$284.62		
B. Full Name, Mailing Address and ZIP Code Dr. Ira B. Potter P.O. Box 190 Lackey, KY 41643		Name of Employer Self Employed	Date (month, day, year) 12/16/83	Amount of Each Receipt This Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Physician		
		Aggregate Year-to-Date-\$1000.00		
C. Full Name, Mailing Address and ZIP Code Mr. Bill N. Ramsey Box 390 Pikeville, KY 41501		Name of Employer Self Employed	Date (month, day, year) 11/22/83	Amount of Each Receipt This Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General		Occupation Coal Operator	11-22-83	\$1000.00
		Aggregate Year-to-Date-\$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code Mrs. Mary Sledd Ratterman 188 Crescent Avenue Louisville, KY 40206		Name of Employer None	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Homemaker		
		Aggregate Year-to-Date-\$ 1000.00		
E. Full Name, Mailing Address and ZIP Code Mr. Douglas A. Reece 304 Bridge Street Manchester, KY 40962		Name of Employer Self Employed	Date (month, day, year) 12/27/83	Amount of Each Receipt This Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Attorney		
		Aggregate Year-to-Date-\$ 1000.00		
F. Full Name, Mailing Address and ZIP Code Mrs. Katie Reece 304 Bridge Street Manchester, KY 40962		Name of Employer None	Date (month, day, year) 12/27/83	Amount of Each Receipt This Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Homemaker		
		Aggregate Year-to-Date-\$1000.00		
G. Full Name, Mailing Address and ZIP Code Dr. K. Thomas Reichard 2425 Cherokee Parkway Louisville, KY 40204		Name of Employer Self Employed	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Doctor		
		Aggregate Year-to-Date-\$500.00		
SUBTOTAL of Receipts This Page (optional)				\$6,484.62
TOTAL This Period (last page this line number only)				

84020030118

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Dr. William E. Reutman 10880 Jimberly Drive Union, KY 41091 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Self Employed Occupation Doctor Aggregate Year-to-Date-\$ 600.00	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$500.00
B. Full Name, Mailing Address and ZIP Code Mr. Warren W. Rosenthal 751 Cottage Grove Lexington, KY 40502 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General	Name of Employer Occupation Aggregate Year-to-Date-\$2000.00	Date (month, day, year) 12/12/83 12-12-83	Amount of Each Receipt This Period \$1000.00 \$1000.00
C. Full Name, Mailing Address and ZIP Code Mr. Robert W. Rounsavall, III 7501 Covered Bridge Road Prospect, KY 40059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Dixie Warehouse & Cartage Company Occupation Executive Aggregate Year-to-Date-\$ 500.00	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$150.00
D. Full Name, Mailing Address and ZIP Code Mr. William M. Rue 4512 Springdale Road Louisville, KY 40222 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer First National Bank Occupation Banker Aggregate Year-to-Date-\$1000.00	Date (month, day, year) 12/2/83	Amount of Each Receipt This Period \$1000.00
E. Full Name, Mailing Address and ZIP Code Mrs. Phyllis Savidge Lakeside, Otter Lake Estates Hanson, KY 42413 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General	Name of Employer None Occupation Homemaker Aggregate Year-to-Date-\$2000.00	Date (month, day, year) 12/9/83 12-12-83	Amount of Each Receipt This Period \$900.00 \$1000.00
F. Full Name, Mailing Address and ZIP Code Mrs. Helen L. Scott P.O. Box 7 Henderson, KY 42420 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer None Occupation Homemaker Aggregate Year-to-Date-\$1000.00	Date (month, day, year) 12/6/83	Amount of Each Receipt This Period \$1000.00
G. Full Name, Mailing Address and ZIP Code Mr. John L. Shea 617 Hatherleigh Lane Louisville, KY 40222 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Allen M. Reager Occupation Insurance Aggregate Year-to-Date-\$500.00	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$500.00
SUBTOTAL of Receipts This Page (optional)			\$7050.00
TOTAL This Period (last page this line number only)			

84020030119

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule for each category of the Detailed Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Hugh M. Shwab, Jr. 10 River Hill Road Louisville, KY 40207	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
	Occupation	11/22/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$500.00		
B. Full Name, Mailing Address and ZIP Code Mr. James R. Skaggs 817 Colonel Anderson Parkway Louisville, KY 40222	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$100.00
	Occupation	12/19/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$300.00		
C. Full Name, Mailing Address and ZIP Code Mr. Allan B. Solomon 3303 Innes Trace Court Louisville, KY 40222	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$1000.00
	Occupation	12/30/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$2000.00		
D. Full Name, Mailing Address and ZIP Code Mrs. Rose Sosowsky 1622 Almara Circle Louisville, KY 40205	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$1000.00 \$1000.00
	Occupation	12-14-83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Aggregate Year-to-Date-\$2000.00		
E. Full Name, Mailing Address and ZIP Code Mr. Donald U. Stauble 321 Blankenbaker Lane Louisville, KY 40207	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$75.00
	Occupation	12/6/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$275.00		
F. Full Name, Mailing Address and ZIP Code Mr. Douglas D. Stegner 1644 Cherokee Road Louisville, KY 40205	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	12/6/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$500.00		
G. Full Name, Mailing Address and ZIP Code Mr. Joseph E. Stopher 416 Jarvis Lane Louisville, KY 40207	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$100.00
	Occupation	11/18/83	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$600.00		
SUBTOTAL of Receipts This Page (optional)			4275.00
TOTAL This Period (last page this line number only)			

84020030120

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ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Henry D. Stratton P.O. Box 851 Pikeville, KY 41501	Name of Employer Stratton, May & Hays Occupation Attorney	Date (month, day, year) 12/23/83	Amount of Each Receipt this Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 1000.00		
B. Full Name, Mailing Address and ZIP Code Mr. Dan J. Sullivan, Jr. 4042 Ormond Road Louisville, KY 40207	Name of Employer Occupation	Date (month, day, year) 11/28/83	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 350.00		
C. Full Name, Mailing Address and ZIP Code Mr. Roger F. Tarter P.O. Box 10 Dunnville, KY 42528	Name of Employer Occupation Businessman	Date (month, day, year) 12/28/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 500.00		
D. Full Name, Mailing Address and ZIP Code Mrs. Jean Taylor 5900 Creighton Hill Road Louisville, KY 40207	Name of Employer None Occupation Homemaker	Date (month, day, year) 12/6/83	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 300.00		
E. Full Name, Mailing Address and ZIP Code Mr. J. C. Truscott GE/Appliance Park, 3-215 Louisville, KY 40225	Name of Employer General Electric Occupation Businessman	Date (month, day, year) 12/28/83	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 300.00		
F. Full Name, Mailing Address and ZIP Code Dr. H. M. Vandiviere 3429 Brookhaven Drive Lexington, KY 40502	Name of Employer Self Occupation Physician	Date (month, day, year) 12/30/83	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$ 300.00		
G. Full Name, Mailing Address and ZIP Code Mr. Jack Voigt 2 Rio Vista Drive Louisville, KY 40207	Name of Employer Self Employed Occupation Insurance Agent	Date (month, day, year) 12/1/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date-\$500.00		
SUBTOTAL of Receipts This Page (optional)			\$3150.00
TOTAL This Period (last page this line number only)			

84020030121

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 A
(Use separate schedule(s) for each
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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Walter P. Walters, Jr. 2112 Lakeside Drive Lexington, KY 40502		Name of Employer None	Date (month, day, year) 11/22/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Retired	Amount of Each Receipt this Period \$1000.00
		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Tom M. Weddle Route 5 Liberty, KY 42539		Name of Employer	Date (month, day, year) 12/12/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation	Amount of Each Receipt This Period \$250.00
		Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. Charles L. Weisberg 1400 Willow Avenue, #1901 Louisville, KY 40204		Name of Employer Bass & Weisberg Realtors	Date (month, day, year) 12/30/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Realtor	Amount of Each Receipt This Period \$700.00 \$ 37.47
		Aggregate Year-to-Date-\$837.43	
D. Full Name, Mailing Address and ZIP Code Mr. Y. Peyton Wells 94 Warrior Road Louisville, KY 40207		Name of Employer None	Date (month, day, year) 12/16/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Retired	Amount of Each Receipt This Period \$500.00
		Aggregate Year-to-Date-\$.	
E. Full Name, Mailing Address and ZIP Code Mr. Howard Wilkins, Jr. 250 N. Rock Road, Suite 150 Wichita, KS 67206		Name of Employer Self Employed	Date (month, day, year) 12/27/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Occupation Entrepreneur	Amount of Each Receipt This Period \$1000.00 \$1000.00
		Aggregate Year-to-Date-\$ 2000.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Marguerite Williams Old Monticello Road Thomasville, GA 31792		Name of Employer Self Employed	Date (month, day, year) 12/5/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Investments	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. William B. Wilson 600 N. Marienfeld, Suite 500 Midland, TX 79701		Name of Employer Self Employed	Date (month, day, year) 12/5/83
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary		Occupation Entrepreneur	Amount of Each Receipt This Period \$1000.00
		Aggregate Year-to-Date-\$1000.00	
SUBTOTAL of Receipts This Page (optional)			\$6487.47
TOTAL This Period (last page this line number only)			

940200301212

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Edward J. Winkler 5100 Brownsboro Road, #113 Louisville, KY 40222	Name of Employer Furniture Showrooms	Date (month, day, year) 12/14/83	Amount of Each Receipt this Period \$300.00
	Occupation Businessman		
	Aggregate Year-to-Date--\$ 300.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
B. Full Name, Mailing Address and ZIP Code Mr. Robert H. Wood 502 Ridgewood Road Louisville, KY 40207	Name of Employer None	Date (month, day, year) 12/5/83	Amount of Each Receipt This Period \$200.00
	Occupation Retired		
	Aggregate Year-to-Date--\$ 400.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
C. Full Name, Mailing Address and ZIP Code Mr. Joseph B. Woodlief 331 Zorn Avenue, #5 Louisville, KY 40206	Name of Employer Glenmore Dist. Company	Date (month, day, year) 11/22/83	Amount of Each Receipt This Period \$200.00
	Occupation Executive		
	Aggregate Year-to-Date--\$ 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
D. Full Name, Mailing Address and ZIP Code Dr. Byron Young 2040 Von List Way Lexington, KY 40502	Name of Employer Self Employed	Date (month, day, year) 12/6/83 12/19/83	Amount of Each Receipt This Period \$500.00 \$500.00
	Occupation Doctor		
	Aggregate Year-to-Date--\$ 1000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
E. Full Name, Mailing Address and ZIP Code Mr. Alfred Shands, III 8909 Hwy 329 Crestwood, KY 40014	Name of Employer	Date (month, day, year) 12-09-83	Amount of Each Receipt This Period \$1000.00
	Occupation		
	Aggregate Year-to-Date--\$ 1000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
F. Full Name, Mailing Address and ZIP Code Ms. Mary A. Huff 120 Westwind Road Louisville, KY 40207	Name of Employer None	Date (month, day, year) 12-28-83	Amount of Each Receipt This Period \$1000.00
	Occupation Homemaker		
	Aggregate Year-to-Date--\$ 1000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
G. Full Name, Mailing Address and ZIP Code Ms. Debbie Davis 2011 Key Blvd. Apt. 600 Arlington, VA 22201	Name of Employer NRSC	Date (month, day, year) 12-27-83	Amount of Each Receipt This Period \$500.00
	Occupation		
	Aggregate Year-to-Date--\$ 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary (inkind) (furniture)			
SUBTOTAL of Receipts This Page (optional).....			\$4200.00
TOTAL This Period (last page this line number only)			

84020030123

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. William H. Harrison P. O. Box 1884 Louisville, KY		Name of Employer Taylor Drug Stores Occupation CEO	Date (month, day, year) 11-22-83 Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mr. Henry R. Heyburn 3918 Leland Road Louisville, KY 40207		Name of Employer Self Occupation Attorney	Date (month, day, year) 12-28-83 Amount of Each Receipt This Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Marshall M. Royce 34 Stonebridge Road Louisville, KY 40207		Name of Employer NTVL Occupation Insurance Executive	Date (month, day, year) 12-12-83 Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Frank B. Hower, Jr. 399 Mockingbird Valley Drive Louisville, KY 40207		Name of Employer Liberty National Bank Occupation President	Date (month, day, year) 12-30-83 Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Ms. Diane F. Royce 34 Stonebridge Road Louisville, Ky 40207		Name of Employer None Occupation Homemaker	Date (month, day, year) 12-12-83 Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Mr. Robert P. Shecter 3600 Weedside Road Louisville, Ky 40222		Name of Employer Medley Distilling Occupation Executive	Date (month, day, year) 12-22-83 Amount of Each Receipt This Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Nancy B. Rash 545 Barberry Lane Louisville, KY 40206		Name of Employer None Occupation Homemaker	Date (month, day, year) 12-30-83 Amount of Each Receipt This Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date-\$ 2000.00	
SUBTOTAL of Receipts This Page (optional)			\$4750.00
TOTAL This Period (last page this line number only)			

84020030124

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Charles J. Baird 415 2nd Street Pikeville, KY 41501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self	Date (month, day, year) 12-50-83	Amount of Each Receipt this Period \$100.00
	Occupation Attorney		
	Aggregate Year-to-Date--\$ 300.00		
B. Full Name, Mailing Address and ZIP Code Mr. Roger M. Coleman 3110 Box Hill Lane Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer None	Date (month, day, year) 10-3-83	Amount of Each Receipt This Period \$1000.00
	Occupation Retired		
	Aggregate Year-to-Date--\$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Ms. Ethel M. Coleman 3110 Box Hill Lane Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer None	Date (month, day, year) 10-3-83	Amount of Each Receipt This Period \$1000.00
	Occupation Homemaker		
	Aggregate Year-to-Date--\$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Mr. Shelly Frank 10002 Shelbyville Road Louisville, KY 40232 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Chi-Chi's Restaurant	Date (month, day, year) 12-28-83	Amount of Each Receipt This Period \$500.00
	Occupation President		
	Aggregate Year-to-Date--\$		
E. Full Name, Mailing Address and ZIP Code Mr. James I. Gibson 1836 Yale Drive Louisville, KY 40205 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 12-28-83	Amount of Each Receipt This Period \$700.00
	Occupation Architect		
	Aggregate Year-to-Date--\$1000.00		
F. Full Name, Mailing Address and ZIP Code Mrs. Karen P. Giles 9 Overbrook Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer None	Date (month, day, year) 9-2-83	Amount of Each Receipt This Period \$1000.00
	Occupation Homemaker		
	Aggregate Year-to-Date--\$1000.00		
G. Full Name, Mailing Address and ZIP Code Mr. Sloane Graff, Jr. 3900 Barbour Lane Louisville, Ky 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 12-27-83	Amount of Each Receipt This Period \$200.00
	Occupation		
	Aggregate Year-to-Date--\$ 200.00		
SUBTOTAL of Receipts This Page (optional)			\$4500.00
TOTAL This Period (last page this line number only)			

9402030135

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Thomas Simons 1400 Willow #2108 Louisville, KY 40204		Name of Employer Capitol Holding Co. Occupation CEO	Date (month, day, year) 12-28-83
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt this Period \$1000.00	
		Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Vertner D. Smith, Jr. 122 Arrowhead Drive Louisville, KY 40207		Name of Employer Vertner D. Smith, Company Occupation Owner	Date (month, day, year) 12-12-83
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period \$500.00	
		Aggregate Year-to-Date—\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Larry J. Steinberg 7500 Adler Way Louisville, KY 40222		Name of Employer Touche Ross & Co. Occupation Accountant	Date (month, day, year) 9-14-83
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period \$500.00	
		Aggregate Year-to-Date—\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Shirley B. Soloman 3303 Innes Trace Court Louisville, KY 40222		Name of Employer None Occupation Homemaker	Date (month, day, year) 12-30-83
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period \$1000.00	
		Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Paul Tafel, Jr. 506 Country Lane Louisville, KY 40207		Name of Employer None Occupation Retired	Date (month, day, year) 12-22-83
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period \$250.00	
		Aggregate Year-to-Date—\$ 750.00	
F. Full Name, Mailing Address and ZIP Code 1		Name of Employer National Republican Occupation	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period	
		Aggregate Year-to-Date—\$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period	
		Aggregate Year-to-Date—\$	
SUBTOTAL of Receipts This Page (optional)			\$3250.00
TOTAL This Period (last page this line number only)			\$106,247.49

84020030126

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11b
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code National Republican Senatorial Committee 404 C. Street, N.E. Washington, D.C. 20002 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General \$120 <input checked="" type="checkbox"/> Other (specify): 1984 Primary (inkind-postage)	Name of Employer Occupation (inkind)	Date (month, day, year) 8-26-83 8-22-83	Amount of Each Receipt this Period \$15,000.00 \$120.00 Aggregate Year-to-Date-\$15,120.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
C. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
D. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
E. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
F. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
G. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period Aggregate Year-to-Date-\$
SUBTOTAL of Receipts This Page (optional)			15,120.00
TOTAL This Period			15,120.00

94020030127

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11C
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code LIB P.A.C. Liberty United Bancorp, I P. O. Box 32500 Louisville, KY 40232	Name of Employer Occupation Political Action Committee Aggregate Year-to-Date-\$ 1500.00	Date (month, day, year) 12-16-83	Amount of Each Receipt This Period \$1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
B. Full Name, Mailing Address and ZIP Code General Electric P.A.C. Fairfield Connecticut 06431	Name of Employer Occupation Political Action Committee Aggregate Year-to-Date-\$ 1850.00	Date (month, day, year) 12-7-83 12-23-83	Amount of Each Receipt This Period \$100.00 \$1250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
C. Full Name, Mailing Address and ZIP Code Republican Majority Fund 227 MA. Ave., N.E. #220 Washington, D.C. 20002	Name of Employer Occupation Aggregate Year to Date-\$ 5000.00	Date (month, day, year) 11-11-83	Amount of Each Receipt This Period \$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date-\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date-\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date-\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date-\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary			
SUBTOTAL of Receipts This Page (optional)			\$7,850.00
TOTAL This Period (last page this line number only)			

8402030123

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 15 for
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 (Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 West Broadway Louisville, KY 40202	Name of Employer 	Date (month, day, year) Monthly, July- December	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on investment	Occupation 		9,625
B. Full Name, Mailing Address and ZIP Code Liberty National Bank 416 West Jefferson Street Louisville, KY 40202	Name of Employer 	Date (month, day, year) Monthly, July- December	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on investment	Occupation 		4,820
C. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 		
D. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 		
E. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 		
F. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 		
G. Full Name, Mailing Address and ZIP Code 	Name of Employer 	Date (month, day, year) 	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 		
SUBTOTAL of Receipts This Page (optional)			14,445
TOTAL This Period (last page this line number only)			14,445

84020030129

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	Printing	7-11-83	1,905.70
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8- 6-83	57.23
	<input type="checkbox"/> Other (specify):	10-1-83	138.60
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Continued		12-31-83	232.06
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communications, Inc. 456 West 32rd Street New York, NY 10030	Media and campaign consulting and production	7-1-83	2,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	7-28-83	2,000.00
	<input type="checkbox"/> Other (specify):	9-2-83	2,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Continued		10-1-83	4,000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	10-1-83	645.43
	<input type="checkbox"/> Other (specify):	10-31-83	4,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Continued		11-23-83	1,193.55
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11-23-83	4,000.00
	<input type="checkbox"/> Other (specify):	12-30-83	5,800.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Continued		11-9-83	33,815.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Bell 9300 Shelbyville Road Louisville, KY 40222	Equipment and service	12-31-83	872.66
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	12-31-83	72.00
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Ballard Hedden Road Versailles, KY 40383	Net Salary	12-31-83	434.15
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
William Bardenwerper 408 Wallace Avenue Louisville, KY 40207	Reimburse dinner with consultants	11-26-83	371.36
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			63,537.74
TOTAL This Period (last page this line number only)			

8402030130

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Lowell Conley 8611 Juarez Court Louisville, KY	Purpose of Disbursement Reimburse Travel expenses	Date (month, day, year) 11-26-83	Amount of Each Disbursement This Period 666.83
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202	Purpose of Disbursement Computer programming and services	Date (month, day, year) 7-11-83	Amount of Each Disbursement This Period 1,423.52
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8-6-83	2,708.93
	<input type="checkbox"/> Other (specify):	10-1-83	592.17
C. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement	Date (month, day, year) 10-19-83	Amount of Each Disbursement This Period 157.27
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	10-19-83	660.86
	<input type="checkbox"/> Other (specify):	11-22-83	1,135.13
D. Full Name, Mailing Address and ZIP Code Dulworth Office Equipment 204 E. Market Street Louisville, KY 40202	Purpose of Disbursement Office equipment	Date (month, day, year) 7-11-83	Amount of Each Disbursement This Period 157.50
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Executive Charter Bowman Field Louisville, KY 40205	Purpose of Disbursement Air travel	Date (month, day, year) 10-1-83	Amount of Each Disbursement This Period 885.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Executive Inn 830 Phillips Lane Louisville, KY 40209	Purpose of Disbursement Room rental and charges	Date (month, day, year) 11-12-83	Amount of Each Disbursement This Period 75.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	12-31-83	187.30
	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Faversham World Travel 2843 Brownsboro Rd. Louisville, KY 40206	Purpose of Disbursement Air travel	Date (month, day, year) 8-6-83	Amount of Each Disbursement This Period 680.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-1-83	114.00
H. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement	Date (month, day, year) 11-23-83	Amount of Each Disbursement This Period 340.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	12-31-83	449.00
	<input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code Federal Express Corp. Box 727, Dept. A Memphis, Tenn. 38194	Purpose of Disbursement Shipping charges	Date (month, day, year) 8-6-83	Amount of Each Disbursement This Period 138.75
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8-31-83	24.00
	<input type="checkbox"/> Other (specify):	9-13-83	24.00
SUBTOTAL of Disbursements This Page (optional)			10,419.26
TOTAL This Period (last page this line number only)			

13002049

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Continued	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-1-83	25.00
		11-26-83	12.50
		12-31-83	240.50
B. Full Name, Mailing Address and ZIP Code Internal Revenue Service Memphis, TN 38102	Purpose of Disbursement Payroll taxes and withholdings Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-31-83	933.79
		12-31-83	23.98
C. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Rd. Louisville, KY 40220	Purpose of Disbursement Air travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-1-83	810.00
		12-31-83	225.00
D. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc. 332 Capital Avenue Frankfort, KY 40601	Purpose of Disbursement Clipping Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7-11-83	269.99
		8-6-83	108.73
		10-1-83	291.70
E. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-23-83	464.32
		12-30-83	198.25
F. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601	Purpose of Disbursement Photocopies; withheld taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7-11-83	79.00
		8-6-83	5.60
		10-1-83	103.40
G. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-83	12.00
		12-31-83	123.82
H. Full Name, Mailing Address and ZIP Code R. Kern 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Air travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7-11-83	56.45
I. Full Name, Mailing Address and ZIP Code Main Travel Agency 730 W. Main Street Louisville, KY 40202	Purpose of Disbursement Air travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-23-83	1,074.00
		12-31-83	340.00
SUBTOTAL of Disbursements This Page (optional)			5,398.03
TOTAL This Period (last page this line number only)			

84020030132

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code A. M. McConnell, Sr. 12A Sequoyah Drive Shelbyville, KY 40065	Purpose of Disbursement Reimburse travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-31-83	Amount of Each Disbursement This Period 229.97
B. Full Name, Mailing Address and ZIP Code Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	Purpose of Disbursement Luncheons and travel reimbursements Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-26-83 11-26-83 12-31-83	Amount of Each Disbursement This Period 111.43 54.18 22.63
C. Full Name, Mailing Address and ZIP Code Steve Mobley 7104 Bearcreek, Apt. A-3 Louisville, KY 40207	Purpose of Disbursement Reimburse for travel, food, printing & office supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7-1-83 7-8-83	Amount of Each Disbursement This Period 28.85 202.89 ..
D. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7-28-83 9-16-83	Amount of Each Disbursement This Period 171.02 272.47
E. Full Name, Mailing Address and ZIP Code Nanz & Kraft Florists 141 Breckinridge Lane Louisville, KY 40207	Purpose of Disbursement Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-1-83 11-26-83	Amount of Each Disbursement This Period 88.76 235.48
F. Full Name, Mailing Address and ZIP Code Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement reimburse travel expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7-1-83 7-28-83 9-2-83	Amount of Each Disbursement This Period 65.00 154.00 95.98
G. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 9-12-83 9-28-83 10-19-83	Amount of Each Disbursement This Period 150.91 368.83 290.95
H. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-26-83 12-2-83	Amount of Each Disbursement This Period 20.00 210.85
I. Full Name, Mailing Address and ZIP Code Odell, Roper & Assoc., Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, MD 20814	Purpose of Disbursement Service fee, printing and mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-1-83 11-12-83	Amount of Each Disbursement This Period 346.00 5,644.16
SUBTOTAL of Disbursements This Page (optional)			8,764.36
TOTAL This Period (last page this line number only)			

34020030133

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 5 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-23-83 12-30-83	3,347.00 5,623.66
B. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Purpose of Disbursement Office rent	Date (month, day, year) 11-30-83	Amount of Each Disbursement This Period 1,763.44
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford Court, #847 Louisville, KY 40291	Purpose of Disbursement Net salary; reimburse shipping charges	Date (month, day, year) 8-24-83 11-26-83	Amount of Each Disbursement This Period 5.30 299.45
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code Pitney Bowes 1901 Embassy Square Blvd. Louisville, KY 40299	Purpose of Disbursement Postage meter rental and postage	Date (month, day, year) 12-15-83 12-15-83	Amount of Each Disbursement This Period 695.94 440.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Ready Electric Co., Inc. 2030 Frankfort Avenue Louisville, KY 40206	Purpose of Disbursement Leasehold improvements	Date (month, day, year) 12-31-83	Amount of Each Disbursement This Period 321.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code S P Communications P. O. Box 974 Burlingame, CA 94010	Purpose of Disbursement Long distance charges	Date (month, day, year) 7-1-83 8-6-83 8-24-83	Amount of Each Disbursement This Period 75.41 149.46 105.38
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Sam Swope Pontiac, Inc. 4311 Shelbyville Road Louisville, KY 40207	Purpose of Disbursement Auto Rental	Date (month, day, year) 7-11-83 8-6-83 10-1-83	Amount of Each Disbursement This Period 30.00 70.00 300.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement	Date (month, day, year) 11-26-83 12-31-83	Amount of Each Disbursement This Period 30.00 30.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code Joseph G. Schiff 1708 Clayton Road Louisville, KY 40205	Purpose of Disbursement Reimburse dinner charges	Date (month, day, year) 8-25-83	Amount of Each Disbursement This Period 56.05
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			13,342.09
TOTAL This Period (last page this line number only)			

84020030134

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 6 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category or the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michael Shea 4601 Lincoln Road Louisville, KY 40220	Reimburse travel expenses	11-12-83	651.00
		11-26-83	119.50
		12-31-83	36.90
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Shivley Newsweek, Inc. 4639 Dixie Highway Shively, KY 40216	Printing	7-11-83	703.34
		11-26-83	895.23
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232	Long distance charges and local service	7-1-83	7.87
		8-6-83	111.61
		8-29-83	177.25
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Continued		10-12-83	92.96
		10-31-83	91.41
		12-7-83	4.12
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Continued		12-31-83	254.27
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburgh, PA 15254	Long distance charges	10-19-83	331.99
		11-22-83	171.18
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Joan M. Steurer 4222 Brookhaven Avenue Louisville, KY 40220	Net salary	11-14-83	450.00
		11-28-83	446.24
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
H. Full Name, Mailing Address and ZIP Code Continued		12-15-83	446.24
		12-30-83	446.24
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
I. Full Name, Mailing Address and ZIP Code Sullivan Screen Print Co., Inc. 3808 Fitzgerald Road Louisville, KY 40216	Bumperstrips	12-7-83	2,310.00
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Disbursements This Page (optional)			7,747.35
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 7 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code V. Lance Tarrance & Assos. 3845 West FM 1960, Suite 400 Houston, TX 77068	Purpose of Disbursement Surveys & expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 9-2-83 10-1-83 10-19-83	Amount of Each Disbursement This Period 3,000.00 23,670.00 2,000.00
B. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-23-83 12-31-83	Amount of Each Disbursement This Period 320.00 270.00
C. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage and postal charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7-1-83 8-5-83 8-24-83	Amount of Each Disbursement This Period 100.00 100.00 200.00
D. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 9-8-83 9-14-83 9-28-83	Amount of Each Disbursement This Period 200.00 163.50 200.00
E. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-28-83 11-4-83 11-7-83	Amount of Each Disbursement This Period 1,800.00 150.00 200.00
F. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-22-83 11-22-83 11-22-83	Amount of Each Disbursement This Period 200.00 40.00 75.00
G. Full Name, Mailing Address and ZIP Code Continued	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-30-83 12-9-83 12-15-83	Amount of Each Disbursement This Period 200.00 200.00 100.00
H. Full Name, Mailing Address and ZIP Code Western Union Telegraph Co. P. O. Box 101250 Atlanta, GA 30392	Purpose of Disbursement Telegrams Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-28-83 12-31-83	Amount of Each Disbursement This Period 278.84 35.86
I. Full Name, Mailing Address and ZIP Code Xerox Corp. 10001 Linn Station Road Louisville, KY 40223	Purpose of Disbursement Maintenance agreement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-26-83	Amount of Each Disbursement This Period 764.94
SUBTOTAL of Disbursements This Page (optional)			34,268.14
TOTAL This Period (last page this line number only)			

84020030136

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 8 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Zip Print 424 West Muhammed Ali Blvd. Louisville, KY 40202	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-26-83 12-31-83	Amount of Each Disbursement This Period 442.87 352.80
B. Full Name, Mailing Address and ZIP Code National Republican Senatorial Committee 404 C Street, N.E. Washington, D.C. 20002	Purpose of Disbursement Contribution-in-kind for printing & postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 8-22-83	Amount of Each Disbursement This Period 120.00
C. Full Name, Mailing Address and ZIP Code Debbie Davis 2011 Key Blvd., Apt. 600 Arlington, VA 22201	Purpose of Disbursement Contribution in kind-office furniture Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-27-83	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			1,415.67
TOTAL This Period (last page this line number only)			144,892.64

84020030137

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1
 LINE NUMBER 208
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Vivian Mattingly
 12701 Cedar Creek Rd.
 Louisville, KY 40202

Purpose of Disbursement

Contribution check of 6-30-83 was returned NSF

Disbursement for: ☒ Primary ☐ General
☒ Other (specify): Check NSF

Date (month, day, year)

7-11-83

Amount of Each Disbursement This Period

1,000.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

84020030138

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 20c
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code United Kentucky PAC Box 34000 Louisville, KY 40232	Purpose of Disbursement Refund excessive contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7-15-83	Amount of Each Disbursement This Period 3,000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			3,000
TOTAL This Period (last page this line number only)			3,000

84020030139

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 21
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Bunning For Governor P. O. Box 23279 Lexington, KY 40523	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-24-83	3,000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			3,000
TOTAL This Period (last page this line number only)			3,000

84020030140

SCHEDULE A

**MEMO ONLY
ITEMIZED RECEIPTS**

Page 1 of 1 for
LINE NUMBER ---
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

EXEMPT LEGAL AND ACCOUNTING SERVICES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Charles R. Simpson III 717 W. Main Street Louisville, KY 40202	Name of Employer Self	Date (month, day, year) Various- July- December	Amount of Each Receipt this Period 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt legal services	Occupation Attorney	Aggregate Year-to-Date—\$	
B. Full Name, Mailing Address and ZIP Code Larry J. Steinberg 7500 Adler Way Louisville, KY 40222	Name of Employer Touche Ross & Co.	Date (month, day, year) Various- July- December	Amount of Each Receipt This Period 1,275
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt accounting services	Occupation GPA	Aggregate Year-to-Date—\$	
C. Full Name, Mailing Address and ZIP Code Robert E. Whiting 200 Old Bond Court, #5 Louisville, KY 40222	Name of Employer Touche Ross & Co.	Date (month, day, year) Various- July- December	Amount of Each Receipt This Period 550
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt accounting services	Occupation Consultant	Aggregate Year-to-Date—\$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
SUBTOTAL of Receipts This Page (optional)			2,325
TOTAL This Period (last page this line number only)			2,325

94020030141



PLEASE COMPLETE ALL INFORMATION IN THE 5 BLOCKS OUTLINED IN ORANGE
SEE BACK OF FORM SET FOR COMPLETE PREPARATION INSTRUCTIONS.

AIRBILL NUMBER

408587966



YOUR FEDERAL EXPRESS ACCOUNT NUMBER
0497-0416-1

DATE
1/31/84
TO (Recipient's Name)

If Hold For Pick-Up or Saturday Delivery,
Recipient's Phone Number

FROM (Your Name)
Larry Steinberg
COMPANY
DOCKE PUSSES CO.
STREET ADDRESS
510 S. BROADWAY
CITY
LOUISVILLE STATE
KY

Secretary of the Senate
COMPANY
Office of Public Records
STREET ADDRESS (P.O. BOX NUMBERS ARE NOT DELIVERABLE)
119 D Street, N.E.
CITY
Washington STATE
D.C.

AIRBILL NO. **408587966**

ZIP (REQUIRED ZIP CODE REQUIRED FOR CORRECT HANDLING)
40203

IN TENDERING THIS SHIPMENT, SHIPPER AGREES THAT
F.E.C. SHALL NOT BE LIABLE FOR SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES ARISING FROM

ZIP (REQUIRED ZIP CODE REQUIRED FOR OVERNIGHT DELIVERY)
20510

YOUR NOTES/REFERENCE NUMBERS (FIRST 12 CHARACTERS WILL ALSO APPEAR ON INVOICE)

PAYMENT ☒ Bill Shipper ☐ Bill Recipient's F.E.C. Acct. ☐ Bill 3rd Party F.E.C. Acct. ☐ Bill Credit Card
☐ Cash In Advance Account Number/Credit Card Number

SERVICES CHECK ONLY ONE BOX		DELIVERY AND SPECIAL HANDLING CHECK SERVICES REQUIRED
PRIORITY 1 <input checked="" type="checkbox"/> OVERNIGHT PARCEL (40 to 70 LBS.) COURIER PAK 7 <input type="checkbox"/> <input checked="" type="checkbox"/> OVERNIGHT ENVELOPE (40 to 70 LBS.) <input type="checkbox"/> OVERNIGHT BOX (40 to 70 LBS.) 4 <input type="checkbox"/> OVERNIGHT TUBE (40 to 70 LBS.) STANDARD AIR 5 <input type="checkbox"/> DELIVERY AND BUSINESS DAY FOLLOWING PICK UP (40 to 70 LBS.)	OVERNIGHT LETTER 6 <input type="checkbox"/> (40 to 20 LBS.) 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	1 <input type="checkbox"/> HOLD FOR PICK UP AT FOLLOWING FEDERAL EXPRESS LOCATION (SHOW IN SERVICE GUIDE RECIPIENT'S PHONE NUMBER REQUIRED) 2 <input checked="" type="checkbox"/> CARRIER 3 <input type="checkbox"/> SIGNATURE SERVICE REQUIRED (See Remarks: Extra charge applies for delivery) 4 <input type="checkbox"/> REGISTERED ARTICLES SERVICE (P-1 and Standard Air Packages only, extra charge) 5 <input type="checkbox"/> GSA (Government Security Service required, extra charge applies) 6 <input type="checkbox"/> DAY A/C 7 <input type="checkbox"/> OTHER SPECIAL SERVICE 8 <input type="checkbox"/> 9 <input type="checkbox"/>

"OVERNIGHT" IS NEXT BUSINESS DAY (MONDAY THROUGH FRIDAY); TWO DAYS FROM ALASKA/HAWAII. SATURDAY DELIVERY AVAILABLE IN CONTINENTAL U.S. SEE "SPECIAL HANDLING."

PACKAGES	WEIGHT	DECLARED VALUE	CS
1	1	1	1
TOTAL	TOTAL	TOTAL	

RECEIVED AT SHIPPER'S DOOR
☐ REGULAR STOP
☐ ON-CALL STOP
☐ F.E.C. LOC.
Federal Express Corporation Employee No.
DATE/TIME For Federal Express Use

CARRIAGE HEREOF, F.E.C. DIS-
CLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, WITH
RESPECT TO THIS SHIPMENT. THIS IS A NON-NEGOTIABLE
AIRBILL SUBJECT TO CONDITIONS OF CONTRACT SET FORTH
ON REVERSE OF SHIPPER'S COPY. UNLESS YOU DECLARE A
HIGHER VALUE, THE LIABILITY OF FEDERAL EXPRESS COR-
PORATION IS LIMITED TO \$100.00. FEDERAL EXPRESS DOES
NOT CARRY CARGO LIABILITY INSURANCE.

EMP. NO.	DATE	ADVANCE ORIGIN
<input type="checkbox"/> CASH RECEIVED	ACT/PRO	
<input type="checkbox"/> RETURN SHIPMENT	ACT/PRO	ADVANCE DESTINATION
<input type="checkbox"/> THIRD PARTY		
<input type="checkbox"/> DEC. TO REL. <input type="checkbox"/> DEC. TO HOLD		OTHER

STREET ADDRESS
CITY
STATE
ZIP

RECEIVED BY: (Signature)
X
DATE/TIME RECEIVED
F.E.C. EMPLOYEE NUMBER

PART #2041730751
FEC-S-0751 D/O/B
REVISION DATE
7/82 NCR
PRINTED U.S.A.

RECIPIENT COPY (AFFIXED TO PACKAGE, GIVEN TO RECIPIENT AT DELIVERY)

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

119 D STREET, N.E.
ROOM A-623
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: _____

CERTIFIED

REGISTERED

X FEDERAL EXPRESS 1-31-84

EXPRESS MAIL

84020030143

RECEIVED.
SECRETARY OF THE SENATE

(Summary: Page)

1.3 AUG -2 2:10

TYPE OF REPORT

- This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steindler
SIGNATURE OF TREASURER

July 28, 1983
Date

SIGNATURE OF TREASURER _____ Date _____

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

All previous versions of FEC FORM 3 and FEC FORM 33 are obsolete.

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)**

Name of Committee (in Full)

McConnell Senate Committee

Report Covering the Period:

From: January 31, 1983 June 30, 1983

I. RECEIPTS

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees
(Memo Entry Unitemized \$ 24,481)

(b) Political Party Committees

(c) Other Political Committees

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans) (add 11a, 11b, 11c and 11d)

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the Candidate

(b) All Other Loans

(c) TOTAL LOANS (add 13a and 13b)

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (Add 11e, 12, 13c, 14 and 15)

II. DISBURSEMENTS

17. OPERATING EXPENDITURES

18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed by the Candidate

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS (add 19a and 19b)

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

(b) Political Party Committees

(c) Other Political Committees

(d) TOTAL CONTRIBUTION REFUNDS (add 20a, 20b and 20c)

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS (Add 17, 18, 19c, 20d and 21)

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD \$ 212,586

24. TOTAL RECEIPTS THIS PERIOD (From Line 16) \$ 201,335

25. SUBTOTAL (Add Line 23 and Line 24) \$ 413,921

26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) \$ 38,589

27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) \$ 375,332

93020051534

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Donald T. Johnson
 3800 Bryan Station Pk.
 Lexington, KY 40511

Name of Employer

Crescent Farms

Date (month,
 day, year)

1/5/83

Amount of Each
 Receipt this Period

\$1,000.00

Occupation

Farmer

Aggregate Year-to-Date-\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

B. Full Name, Mailing Address and ZIP Code

Robert R. Goodin
 3012 Lighthouse Road
 Louisville, KY 40222

Name of Employer

Self

Date (month,
 day, year)

1/6/83

Amount of Each
 Receipt This Period

\$400.00

Occupation

Doctor

Aggregate Year-to-Date-\$400.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Stephen Goodman
 2406 Merrick Road
 Louisville, KY 40207

Name of Employer

Byck Bros. & Co.

Date (month,
 day, year)

1/6/83

Amount of Each
 Receipt This Period

\$300.00

Occupation

Retail

Aggregate Year-to-Date-\$300.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Morton Kasdan
 600 Col. Anderson Pkwy.
 Louisville, KY 40222

Name of Employer

Morton L. Kasdan,
 M.D., F.A.C.S.

Date (month,
 day, year)

1/6/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

Doctor

Aggregate Year-to-Date-\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

Christina L. Brown
 6501 Longview Lane
 Louisville, KY 40222

Name of Employer

Occupation

Date (month,
 day, year)

1/10/83

Amount of Each
 Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

F. Full Name, Mailing Address and ZIP Code

Drura Scott
 Box 7
 Henderson, KY 42420

Name of Employer

Scott Lumber

Date (month,
 day, year)

1/10/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

Owner

Aggregate Year-to-Date-\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

W.H. Smock
 Box 173, Riverwood Drive
 Murray, KY 42071

Name of Employer

H. T. Marketing

Date (month,
 day, year)

1/10/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

1/10/83

\$1,000.00

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$2,000.00

SUBTOTAL of Receipts This Page (optional)

\$6,700.00

TOTAL This Period (last page this line number only)

93020051535

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Randall A. Waller
 Route 7, Sherwood Forest
 King Richard Drive
 Murray, KY 42071

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

1/10/83
1/10/83\$1,000.00
\$1,000.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 2,000.00

B. Full Name, Mailing Address and ZIP Code

James S. Williams
 823 Main
 Sturgis, KY 42459

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

1/10/83

\$500.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

K.T. Reichard
 600 Sunset Road
 Louisville, KY 40206

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Doctor

1/13/83

\$300.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

D. Full Name, Mailing Address and ZIP Code

Edward N. McDevitt
 105 Chipping Way
 Louisville, KY 40222

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Government Employee

1/17/83

\$300.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

E. Full Name, Mailing Address and ZIP Code

C.W. Stoll
 Mockingbird Valley Road
 Louisville, KY 40207

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Retired

1/17/83

\$500.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

F. Full Name, Mailing Address and ZIP Code

J.H. Thornton
 Route 4, Iron Works Road
 Georgetown, KY 40324

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Chairman of Board

1/17/83

\$1,000.00

1/17/83

\$1,000.00

Receipt For: ☒ Primary ☒ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 2,000.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

\$5,600.00

TOTAL This Period (last page this line number only)

93020051536

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 32 for
LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Steve A. Bass
1012 S. 4th Street
Louisville, KY 40203

Name of Employer

Bass Advertising

Date (month,
day, year)

1/25/83

Amount of Each
Receipt this Period

\$1,000.00

Occupation

President

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

F.T. Hensley, Jr.
Route 3, Box 348
Campbellsville, KY 42718

Name of Employer

Taylor County Bank

Date (month,
day, year)

1/30/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Banker

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Joe A. Young
c/o Joe A. Young Realty
Louisa, KY 41239

Name of Employer

Self

Date (month,
day, year)

2/03/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Real Estate

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ann Ferriell
1901 Arboro Place
Louisville, KY 40220

Name of Employer

Atherton High School

Date (month,
day, year)

2/8/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Teacher

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$500.00

E. Full Name, Mailing Address and ZIP Code

Samuel S. Mansbach
c/o Mansbach Metal
1900 Front Street
Ashland, KY 41101

Name of Employer

Mansbach Metal

Date (month,
day, year)

1/10/83

Amount of Each
Receipt This Period

\$100.00

Occupation

Principal

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 600.00

F. Full Name, Mailing Address and ZIP Code

Leonard W. Arentson
c/o Batus
2000 Citizens Plaza
Louisville, KY 40202

Name of Employer

Batus

Date (month,
day, year)

2/16/83

Amount of Each
Receipt This Period

\$500.00

Occupation

V Pres/Controller

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Michael R. Dowling
1620 Montgomery
Ashland, KY 41101

Name of Employer

Self

Date (month,
day, year)

2/21/83

Amount of Each
Receipt This Period

\$250.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$3,850.00

TOTAL This Period (last page this line number only)

93020051537

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mike Malone
 Box 562
 Grayson, KY 41143

Name of Employer

Malone Funeral Home

Date (month,
day, year)

2/21/83

Amount of Each
Receipt this Period

\$250.00

Occupation

Funeral Director

Aggregate Year-to-Date—\$ 250.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

B. Full Name, Mailing Address and ZIP Code

Elwood Parker
 Burning Fork Road, Box 212
 Pikeville, KY 41051

Name of Employer

Parker Mining

Date (month,
day, year)

2/21/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Coalminer

Aggregate Year-to-Date—\$1,000.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Gail Knopf
 610 Jarvis Lane
 Louisville, KY 40207

Name of Employer

Date (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Housewife

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Daniel P. Knopf, Jr.
 610 Jarvis Lane
 Louisville, KY 40207

Name of Employer

Coopers & Lybrand
CPA'sDate (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Accountant

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

John H. Ward, III
 610 Club Lane
 Louisville, KY 40207

Name of Employer

Aetna Life & Casualty

Date (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Insurance

Aggregate Year-to-Date—\$ 500.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

F. Full Name, Mailing Address and ZIP Code

Robert J. Kaiser
 4001 Dutchmans Lane, Suite 4-E
 Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

2/25/83

Amount of Each
Receipt This Period

\$250.00

Occupation

Doctor

Aggregate Year-to-Date—\$ 250.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

Charles R. Savidge
 Lakeside, Otter Lake Estates
 Hanson, KY 42431

Name of Employer

So. Hopkins Coal Co.

Date (month,
day, year)

2/25/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Coal Mine Operator

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

SUBTOTAL of Receipts This Page (optional)

\$8,000.00

TOTAL This Period (last page this line number only)

03020051530

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Richard P. Mayer
 8011 Wolf Pen Branch Rd.
 Prospect, KY 40059

Name of Employer

Ky. Fried Chicken

Date (month,
day, year)

3/1/83

Amount of Each
Receipt This Period

\$300.00

Occupation

Chief Executive Off

Aggregate Year-to-Date-\$ 300.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

B. Full Name, Mailing Address and ZIP Code

Charles R. Coy
 212 N. 2nd Street
 Richmond, KY 40475

Name of Employer

Self

Date (month,
day, year)

3/2/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Betty C. Bivin
 1055 Stone Spring Way
 Louisville, KY 40223

Name of Employer

Date (month,
day, year)

3/3/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Executive Secretary

Aggregate Year-to-Date-\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Ralph Drees
 211 Grandview
 Ft. Mitchell, KY 41017

Name of Employer

Self

Date (month,
day, year)

3/8/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Builder

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

Donald H. Putnam, Jr.
 P.O. Box 991
 Ashland, KY 41101

Name of Employer

Putnam Agency

Date (month,
day, year)

3/8/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Broker

Aggregate Year-to-Date-\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

F. Full Name, Mailing Address and ZIP Code

Jerry B. Buchanan, M.D.
 5615 Wolf Pen Trace
 Prospect, KY 40059

Name of Employer

Methodist Hospital

Date (month,
day, year)

3/9/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

E.D. Duane
 721 Watterson Trail
 Middletown, KY 40243

Name of Employer

The Duane Co.

Date (month,
day, year)

3/10/83

Amount of Each
Receipt This Period

\$500.00

Occupation president
Real Estate

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

SUBTOTAL of Receipts This Page (optional)

\$4,300.00

TOTAL This Period (last page this line number only)

93020051539

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

John P. Locke
2200 N. Rose Island Road
Prospect, KY 40059

Name of Employer

Topco Marketing

Date (month,
day, year)

2/10/83

Amount of Each
Receipt this Period

\$500.00

Occupation

Insurance

3/11/83

\$500.00

3/11/83

\$1,000.00

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary

Name of Employer

Mill Ridge Farm, Ltd

Date (month,
day, year)

3/14/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Controller/CPA

Aggregate Year-to-Date-\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Cy Waddle
708 Jarvis Avenue
Somerset, KY 42501

Name of Employer

Somerset Refining

Date (month,
day, year)

3/14/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

President/Manager

Aggregate Year-to-Date-\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Ben A. Reid, Jr.
98 Warrior Road
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/15/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

Norman M. Cole
3609 Glenview Avenue
Glenview, KY 40025

Name of Employer

Self

Date (month,
day, year)

3/17/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

F. Full Name, Mailing Address and ZIP Code

Frank B. Hower, Jr.
399-A Mockingbird Valley
Louisville, KY 40207

Name of Employer

Liberty National Bank

Date (month,
day, year)

3/21/83

Amount of Each
Receipt This Period

\$500.00

Occupation

President

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

David S. Nightingale
401 Jarvis Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/25/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

SUBTOTAL of Receipts This Page (optional)

\$6,500.00

TOTAL This Period (last page this line number only)

03020051540

SCHEDULE A

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Robert P. Schecter
3600 Woodside Road
Louisville, KY 40222

Name of Employer

Medley Distilling
Company

Date (month,
day, year)

3/28/83

Amount of Each
Receipt this Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Vice Chairman

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

Rucker Todd
6 Woodhill Road
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Attorney

Aggregate Year-to-Date-\$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Michael Chambers
P.O. Box 3908
Evansville, IN 47737

Name of Employer

General Oilfield
Supply

Date (month,
day, year)

3/30/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

Ray C. Dauenhauer, Jr.
1519 Sylvan Way
Louisville, KY 40205

Name of Employer

Daunhauer Plumbing

Date (month,
day, year)

3/31/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Contractor

Aggregate Year-to-Date-\$ 1,000.00

E. Full Name, Mailing Address and ZIP Code

J.B. Robinson
Philip Morris U.S.A.
120 Park Avenue
New York, NY 10017

Name of Employer

Philip Morris

Date (month,
day, year)

4/4/83

Amount of Each
Receipt This Period

\$250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Dir. of Public Affairs

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Gerald Mansbach
P.O. Box 41101
Ashland, KY 41101

Name of Employer

Mansbach Metal

Date (month,
day, year)

4/7/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Principal

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

William F. Miles
Route 2, Box 133
Anchorage, KY 40223

Name of Employer

Process Machinery,
Inc.

Date (month,
day, year)

4/7/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Chairman of Board

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

\$5,250.00

TOTAL This Period (last page this line number only)

93020051541

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

William Hoskins
2029 Lakeshore
Lexington, KY 40502

Name of Employer

Lexington Building
Supply

Date (month,
day, year)

4/8/83

Amount of Each
Receipt this Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Owner-Self Employed

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

L.A. Caperton
8202 Wolf Pen Branch Road
Prospect, KY 40059

Name of Employer

Self

Date (month,
day, year)

3/21/83
4/18/83

Amount of Each
Receipt This Period

\$250.00
\$250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Investor

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

C.R. Morrison
504 Rolling Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

4/18/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation
Doctor

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

James C. Grundy, Jr.
Star Route
Lebanon, KY 40033

Name of Employer

Self

Date (month,
day, year)

4/26/83

Amount of Each
Receipt This Period

\$250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Farmer

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Anne Hoke
1114 County Cork Drive
Murray, KY 42071

Name of Employer

Occupation

Homemaker

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Charles Hoke
1114 County Cork Drive
Murray, KY 42071

Name of Employer

Hoke Mining

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 primary

Occupation

President

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

C.I. Mahon
3721 Fairway Lane
Louisville, KY 40207

Name of Employer

Captains Quarters

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Restauranteer

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

\$5,250.00

TOTAL This Period (last page this line number only)

93020051542

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Y.P. Wells
94 Warrior Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

4/28/83

\$500.00

Occupation

Retired

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Darrell Wells
4898 Brownsboro Center
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

4/28/83

\$500.00

Occupation

Security Analyst

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Helen E. Abell
Mockingbird Valley Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/3/83

\$1,000.00

Occupation

Housewife

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

George H. Collins
4 Overbrook Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

4/15/83

\$250.00

5/4/83

\$250.00

Occupation

President

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Larry N. Cook, M.D.
2011 Woodford Place
Louisville, KY 40205

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$300.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Henning Hilliard
4506 Upper River Road
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$500.00

Occupation

Stock Broker

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Lillie F. Webb
Xalapa Farm
Route 4, Box 122
Paris, KY 40301

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$1,000.00

5/4/83

\$1,000.00

Occupation

Horsebreeder

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

SUBTOTAL of Receipts This Page (optional)

\$5,300.00

TOTAL This Period (last page this line number only)

3 0 2 0 0 5 1 5 4 3

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

John R. Brooking
421 Garrard Street
Covington, KY 41011

Name of Employer

Self

Date (month,
day, year)

5/10/83

Amount of Each
Receipt this Period
\$500.00

Occupation

Attorney

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

George H. Warren, Jr.
1247 Laurel Drive
Owensboro, KY 42301

Name of Employer

Zogg Oil Company

Date (month,
day, year)

5/11/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil & Gas Developer

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Milton S. Yunker
P.O. Box 1983
Owensboro, KY 42301

Name of Employer

Zogg Oil Company

Date (month,
day, year)

5/11/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil & Gas Developer

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Charles J. Fisher, Sr.
Route 2, Box 6307
Prospect, KY 40059

Name of Employer

Reliance Universal

Date (month,
day, year)

5/12/83

Amount of Each
Receipt This Period
\$500.00

Occupation

President & CEO

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Margaret S. Duane
721 Watterson Trail
Middletown, KY 40243

Name of Employer

Date (month,
day, year)

5/16/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Homemaker

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

F. Full Name, Mailing Address and ZIP Code

David L. Daugherty
1600 Gardiner Lane, #118
Louisville, KY 40205

Name of Employer

Self-Daugherty,
Trautwein, & HDate (month,
day, year)

5/17/83

Amount of Each
Receipt This Period
\$250.00

Occupation

Professional Engineer

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Becky Locke
2200 N. Rose Island Road
Prospect, KY 40059

Name of Employer

Date (month,
day, year)

5/17/83

Amount of Each
Receipt This Period
\$1,000.00

Occupation

Homemaker

Receipt For:

☒ Primary☒ General☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

SUBTOTAL of Receipts This Page (optional)

\$4,750.00

TOTAL This Period (last page this line number only)

93020051544

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Shirley W. Palmer-Ball Box 7155 Louisville, KY 40207	Name of Employer Palmer Products Occupation President	Date (month, day, year) 5/17/83	Amount of Each Receipt this Period \$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 400.00		
B. Full Name, Mailing Address and ZIP Code Robert T. Trautwein 7814 Pine Ridge Road Louisville, KY 40222	Name of Employer Self-Daugherty, Trautwein & H Occupation Professional Engineer	Date (month, day, year) 5/17/83	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 250.00		
C. Full Name, Mailing Address and ZIP Code Henry R. Heyburn 3918 Leland Road Louisville, KY 40207	Name of Employer Self Occupation Attorney	Date (month, day, year) 5/20/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Edwin L. Goldberg Paper Products, Inc. 129 N. Randolph Clarksville, IN 47130	Name of Employer Paper Products, Inc. Occupation President	Date (month, day, year) 5/27/83	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 250.00		
E. Full Name, Mailing Address and ZIP Code George N. King, Sr. 7105 Fox Harbor Road Prospect, KY 40059	Name of Employer Mr. Klean Occupation President	Date (month, day, year) 5/27/83	Amount of Each Receipt This Period \$700.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 700.00		
F. Full Name, Mailing Address and ZIP Code Robert M. Timmerman 2009 Camargo Road Louisville, KY 40207	Name of Employer Riverport Authority Occupation Secretary/Treasurer	Date (month, day, year) 5/27/83	Amount of Each Receipt This Period \$700.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 700.00		
G. Full Name, Mailing Address and ZIP Code Ardell S. Young 4511 Greenwood Avenue Louisville, KY 40211	Name of Employer Mr. Klean Occupation Vice President	Date (month, day, year) 5/27/83	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Aggregate Year-to-Date—\$ 300.00		
SUBTOTAL of Receipts This Page (optional)			\$3,600.00
TOTAL This Period (last page this line number only)			

A 3020051545

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Charles R. Simpson, III 3906 Elfin Avenue Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 6/2/83	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Attorney	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Jesse C. Bollinger, Jr. 4000 Glenview Avenue Glenview, KY 40025	Name of Employer Self	Date (month, day, year) 6/6/83 6/6/83	Amount of Each Receipt This Period \$1,000.00 \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General	Occupation Builder	Aggregate Year-to-Date—\$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code Norton R. Cohen 4800 Springdale Road Louisville, KY 40222	Name of Employer 	Date (month, day, year) 6/10/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Retired	Aggregate Year-to-Date—\$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Jan S. Karzen 515 Country Lane Louisville, KY 40207	Name of Employer Paul Semonin Co.	Date (month, day, year) 6/13/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Real Estate	Aggregate Year-to-Date—\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Charles C. Smith 2109 Starmont Road Louisville, KY 40207	Name of Employer Self	Date (month, day, year) 6/14/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Doctor	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Robert H. Kamman 2313 Clarkwood Road Louisville, KY 40207	Name of Employer 	Date (month, day, year) 6/15/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation 	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Jeannette Priebe 2007 Goshen Lane Prospect, KY 40059	Name of Employer Jefferson County Government	Date (month, day, year) 6/15/83 6/15/83	Amount of Each Receipt This Period \$200.00 \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Personnel Director	Aggregate Year-to-Date—\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			\$5,250.00
TOTAL This Period (last page this line number only)			

83020051546

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Carl J. Zoeller
 9011 Whipps Mill Rd.
 Louisville, Ky. 40222

Name of Employer

Masters Supplies

Date (month,
 day, year)

6/15/83

Amount of Each
 Receipt this Period

500.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

David L. Huber
 2335 Village Drive
 Louisville, Ky. 40205

Name of Employer

Jefferson Co. Govt.

Date (month,
 day, year)

6/16/83

Amount of Each
 Receipt This Period

250.00

Occupation

C.E.O.

Aggregate Year-to-Date-\$ 250.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Baylor Landrum, Jr.
 3729 Fairway Lane
 Louisville, Ky. 40207

Name of Employer

NT&L

Date (month,
 day, year)

3/18/83

Amount of Each
 Receipt This Period

250.00

Occupation

Insurance Exec.

Aggregate Year-to-Date-\$ 500.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Joan Bryan
 3821 Manner Dale Drive
 Louisville, Ky. 40220

Name of Employer

Jefferson County

Date (month,
 day, year)

1/7/83

Amount of Each
 Receipt This Period

200.00

Occupation

Program Worker

Aggregate Year-to-Date-\$ 300.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

Karen P. Giles
 9 Overbrook Road
 Louisville, Ky. 40207

Name of Employer

Date (month,
 day, year)

6/17/83

Amount of Each
 Receipt This Period

1,000.00

Occupation

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Vertner D. Smith, Jr.
 122 Arrowhead Road
 Louisville, Ky. 40207

Name of Employer

The Vertner Smith Co.

Date (month,
 day, year)

6/17/83

Amount of Each
 Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$ 500.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

H. L. Duerson
 400 Pleasantview Avenue
 Louisville, Ky. 40206

Name of Employer

Southern Optical

Date (month,
 day, year)

6/20/83

Amount of Each
 Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$ 500.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

SUBTOTAL of Receipts This Page (optional)

3,550.00

TOTAL This Period (last page this line number only)

93020051547

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Campaign

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Fuller 3018 Springcrest Drive Louisville, Ky. 40222	Thomas Industries	6/20/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation: President	Aggregate Year-to-Date-\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James A. Kegley 2051 Manor Dr. Lexington, Ky. 40502		6/20/83	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Occupation	6/20/83	1000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Tafel, Jr. 506 Country Lane Louisville, Ky. 40207		6/20/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation: Retired	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
D. D. Gregory 11106 Owl Creek Lane Louisville, Ky. 40223	Self-Builder/Dev.	6/21/83	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primry	Occupation: Builder	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Samuel Pollitt, III 12413 Lucas Lane Louisville, Ky. 40223	Self-Builder/Dev.	6/21/83	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation: Real Estate	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark B. Davis, Jr. 450 Swing Lane Louisville, Ky. 40207	Self	6/22/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation: Attorney	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary S. Doll 5001 Avish Lane Harrods Creek, Ky. 40027	Self	6/22/83	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Occupation: Housewife	6/22/83	1,000.00
SUBTOTAL of Receipts This Page (optional)			6,000.00
TOTAL This Period (last page this line number only)			

83020051548

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Sloane Graff, Jr.
 3900 Barbour Lane
 Louisville, Ky. 40222

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

Occupation

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Neil Huffman
 7501 Hunting Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Self

6/22/83

250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Don G. McClinton
 6205 Deep Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Yellow Cab Co.

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Jane A. McClinton
 6205 Deep Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Housewife

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Patrick H. Mitchell
 1520 Castlewood
 Louisville, Ky. 40204

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Mitchell & Henson

6/22/83

1000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Claude C. White
 P.O. Box 1208
 Birmingham, Al. 35201

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

6/22/83

1000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Cecil C. Barnett
 318 Mockingbird Valley
 Louisville, Ky. 40207

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Tube Turns

6/23/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

9
 4
 1
 5
 0
 2
 0
 0
 5
 3
 8

C

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

E. D. Canan
 Old Louisville Road
 Fisherville, Ky. 40023

Name of Employer

Self

Date (month,
day, year)

6/23/83

Amount of Each
Receipt this Period
250.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

Doctor

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

J. E. Edens
 Box 248, Route 2
 Shelbyville, Ky. 40065

Name of Employer

Date (month,
day, year)

6/23/83

Amount of Each
Receipt This Period
500.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

Retired

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Shelly Frank
 Chi-Chi's Restaurant
 10002 Shelbyville Rd.
 Louisville, Ky. 40222

Name of Employer

Chi Chi's Restaurant

Date (month,
day, year)

6/23/83

Amount of Each
Receipt This Period
1000.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Daniel P. Garcia
 1714 Dundee Way
 Louisville, Ky. 40205

Name of Employer

Self

Date (month,
day, year)4/18/83
6/23/83Amount of Each
Receipt This Period
250.00
500.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

Doctor

Aggregate Year-to-Date-\$ 750.00

E. Full Name, Mailing Address and ZIP Code

James E. Hardy
 16 Indian Hills Trail
 Louisville, Ky. 40207

Name of Employer

Brinley Hardy Co.

Date (month,
day, year)

6/23/83

Amount of Each
Receipt This Period
500.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

I. W. Hughes
 159 Westwind Road
 Louisville, Ky. 40207

Name of Employer

Brown & Williamson

Date (month,
day, year)

6/23/83

Amount of Each
Receipt This Period
300.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

Executive

Aggregate Year-to-Date-\$ 300.00

G. Full Name, Mailing Address and ZIP Code

Florence J. Hume
 2012 Starmont Road
 Louisville, Ky. 40207

Name of Employer

Date (month,
day, year)

6/23/83

Amount of Each
Receipt This Period
1000.00

Receipt For:

☒ Primary☐ General☒ Other (specify):

1984 Primary

Occupation

Homemaker

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carroll L. Lurding P.O. Box 7461 326 Mockingbird Hill Rd. Louisville, Ky. 40207	Self	5/27/83	25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Homebuilder	6/23/83	500.00
Aggregate Year-to-Date-\$ 525.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
E. J. McGrath 1400 Willow, #1706-8 Louisville, Ky. 40204	Self	6/23/83	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation		
Aggregate Year-to-Date-\$ 300.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
W. H. Millard, Jr. 7913 Rose Island Rd. Prospect, Ky. 40059	Transit Oil Co.	6/23/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Chairman of Board		
Aggregate Year-to-Date-\$ 500.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jennye S. Smock Box 173 Riverwood Drive Murray, Ky. 42071		6/23/83	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Occupation Homemaker	6/23/83	1000.00
Aggregate Year-to-Date-\$ 2000.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph E. Stopher 416 Jarvis Lane Louisville, Ky. 40207		6/23/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Attorney		
Aggregate Year-to-Date-\$ 500.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Seth W. Hancock Claiborne Farm, Rt.2 Paris, Ky. 40361	Self	6/24/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Thoroughbred Breeder		
Aggregate Year-to-Date-\$ 500.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Charles T. Steadman 429 6th Avenue Huntington, W.V. 25701	Cavalier Enterprises	6/24/83	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Occupation	6/24/83	1000.00
Aggregate Year-to-Date-\$ 2000.00			
SUBTOTAL of Receipts This Page (optional)			6,325.00
TOTAL This Period (last page this line number only)			

15302005153

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene P. Gardner 8914 Ayrshire Avenue Louisville, Ky. 40222	Lou. Cement Co.	6/27/83	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Manager	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Thomas L. Hensley 6206 N. Hitt Rd. Louisville, Ky. 40222	Name of Employer Druthers	Date (month, day, year) 6/27/83	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation President	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Ann W. Jay 416 Mockingbird Hill Rd. Louisville, Ky. 40207	Name of Employer	Date (month, day, year) 6/27/83	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Homemaker	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code John M. Nichols 700 Blankenbaker Lane Louisville, Ky. 40207	Name of Employer Coopers & Lybrand	Date (month, day, year) 6/27/83	Amount of Each Receipt This Period 750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Accountant	Aggregate Year-to-Date-\$ 750.00	
E. Full Name, Mailing Address and ZIP Code Gerald B. Anderson 126 Burnley Louisville, Ky. 40243	Name of Employer Gibbs-Inman Co.	Date (month, day, year) 6/28/83	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Exec. V-P	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Charles M. Brohm 5902 Foxcroft Road Prospect Ky. 40059	Name of Employer Hospital-Child Protective Services	Date (month, day, year) 6/28/83	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Doctor	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code C. T. Cone 1101 Alta Vista Rd. Louisville, Ky. 40207	Name of Employer Stoll, Keenon and Park	Date (month, day, year) 6/28/83	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary	Occupation Advertising	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4,500.00
TOTAL This Period (last page this line number only)			

83020051552

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Louis R. Glogower, Jr.
5100 Brownsboro Rd, #732
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

6/28/83

Amount of Each
Receipt this Period
\$500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

John S. Greenebaum
2233 Douglass Blvd.
Louisville, KY 40205

Name of Employer

Self

Date (month,
day, year)

6/28/83

Amount of Each
Receipt This Period
\$1,000.00

Occupation

Attorney

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Alex M. Forrester
3716 Fairway Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

6/29/83

Amount of Each
Receipt This Period
\$1,000.00
\$1,000.00

Occupation

Doctor

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

D. Full Name, Mailing Address and ZIP Code

James Gilbert
1001 Outer Loop
Louisville, KY 40219

Name of Employer

Gilbert & Mitchell

Date (month,
day, year)

6/29/83

Amount of Each
Receipt This Period
\$1,000.00

Occupation

Self Employed

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1,000.00

E. Full Name, Mailing Address and ZIP Code

Kenneth R. Jaegers
515 Tiffany Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

6/29/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Robert G. Raque
2904 Falmouth Drive
Louisville, KY 40205

Name of Employer

Sedco, Inc.

Date (month,
day, year)

6/29/83

Amount of Each
Receipt This Period
\$1,000.00

Occupation

President

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Martine C. Tway
2601 S. 3rd Street
Louisville, KY 40208

Name of Employer

Date (month,
day, year)

6/29/83

Amount of Each
Receipt This Period
\$1,000.00
\$500.00

Occupation

Homemaker

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 1,500.00

SUBTOTAL of Receipts This Page (optional)

\$7,500.00

TOTAL This Period (last page this line number only)

3
5
1
5
0
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2
3

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G.T. Underhill 1806 Knollwood Road Louisville, KY 40207	G. T. Underhill & Associates	6/29/83	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation General Partner		
	Aggregate Year-to-Date-\$250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert P. Adelberg, Jr. 94 Valley Road Louisville, KY 40204	Self	6/30/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Real Estate		
	Aggregate Year-to-Date-\$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bentley Badgett, II 220 N. Main Street Madisonville, KY 42431	Self	6/30/83	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General	Occupation Coal Operator	6/30/83	\$1,000.00
	Aggregate Year-to-Date-\$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rogers Badgett Madisonville, KY 42431	Self	6/30/83	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General	Occupation Investor	6/30/83	\$1,000.00
	Aggregate Year-to-Date-\$ 2,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
K.N. Berry 635 West Main Street Louisville, KY 40202	K. Norman Berry ASSOC.	6/30/83	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Architect		
	Aggregate Year-to-Date-\$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ed Butler 2221 Buechel Road Louisville, KY 40218	Self	6/30/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Homebuilder		
	Aggregate Year-to-Date-\$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William C. Cheatham, Jr. 7203 Fox Harbor Road Prospect, KY 40059	Self	6/30/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Doctor		
	Aggregate Year-to-Date-\$ 500.00		
SUBTOTAL of Receipts This Page (optional)			\$6,750.00
TOTAL This Period (last page this line number only)			

4
5
1
5
0
0
2
3
A

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Bernard A. Dahlem
 604 Briar Hill Road
 Louisville, KY 40206

Name of Employer

Dahlem Const. Co.

Date (month,
 day, year)

6/30/83
 6/30/83

Amount of Each
 Receipt this Period
 \$500.00
 \$250.00

Occupation

Construction

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 750.00

B. Full Name, Mailing Address and ZIP Code

Chester L. Davidson, M.D.
 4001 Dutchmans Lane
 Suburban Medical Plaza, 6C
 Louisville, KY 40207

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$500.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Malcolm M. Decamp
 615 Club Lane
 Louisville, KY 40207

Name of Employer

Faversham World
 Travel

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$500.00

Occupation

Executive

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Roland Giradet
 3121 Runnymede Road
 Louisville, KY 40222

Name of Employer

Medical Towers Nor.

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$400.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 400.00

E. Full Name, Mailing Address and ZIP Code

J.J. Guarnaschelli, M.D.
 568 Medical Towers South
 Louisville, KY 40202

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$300.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$300.00

F. Full Name, Mailing Address and ZIP Code

Ronald D. Hogart
 4017 Buffalo Trace
 Madisonville, KY 42431

Name of Employer

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$1,000.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Wesley S. Johnson
 2315 Clarkwood Drive
 Louisville, KY 40207

Name of Employer

Blue Boar Exec. Office

Date (month,
 day, year)

2/14/83
 6/30/83

Amount of Each
 Receipt This Period
 \$100.00
 \$500.00

Occupation

Executive

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 600.00

SUBTOTAL of Receipts This Page (optional)

\$4,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedules) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy H. Jones 901 Rugby Place Louisville, KY 40222		6/30/83	\$1,000.00
	Occupation Housewife	6/30/83	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General		Aggregate Year-to-Date-\$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph E. Knight 1850 Lakeview Drive Madisonville, KY 42431		6/30/83	\$1,000.00
	Occupation	6/30/83	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General		Aggregate Year-to-Date-\$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard M. Knox 5228 Moccasin Trail Louisville, KY 40207	Self	6/30/83	\$350.00
	Occupation CPA		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lynn M. Koggan 1020 Everett Avenue Louisville, KY 40204		6/30/83	\$500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J.G. Lang, Jr. P.O. Box 190 Goshen, KY 40026		6/30/83	\$250.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Phillip J. Levy 5305 Glencrest Drive Glenview, KY 40025	Self-Levy Lumber & Building	6/30/83	\$750.00
	Occupation President		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 750.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Lipshcutz 13904 Bell Vista Ct., North Prospect, KY 40059	Self	6/30/83	\$500.00
	Occupation Self		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			\$6,350.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert H. Loeb 7807 Westover Dr. Louisville, KY 40202	Self	6/30/83	\$350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Insurance	Aggregate Year-to-Date-\$ 350.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ronald R. Masden M.D. 616 Medical Towers North Louisville, KY 40202	Self	6/30/83	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Doctor	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Vivian M. Mattingly 12701 Cedar Creek Rd. Louisville, KY 40202	Mattingly Heating & Cooling & Plumbing	6/30/83	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Secretary/Treasurer	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Clay L. Morton 398 Mockingbird Valley Rd Louisville, KY 40207	Self	6/30/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Attorney	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lynn L. Ogden 3703 Ten Broeck Way Louisville, KY 40222	Self	6/30/83	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Doctor	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joan Pelle 4922 Swaps Lane Louisville, KY 40216	D. J. Inc.	6/30/83	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation Bookkeeper	Aggregate Year-to-Date-\$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John R. Raker 3109 Springcrest Drive Louisville KY 40222		6/30/83	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary	Occupation	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			\$3150.00
TOTAL This Period (last page this line number only)			

6302005157

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Nancy B. Rash
 545 Barberry Lane
 Louisville KY, 40206

Name of Employer

Occupation

Housewife

Date (month,
day, year)

6/30/83

Amount of Each
Receipt this Period
\$1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 100.00

B. Full Name, Mailing Address and ZIP Code

William J. Receveur, Jr.
 1324 Navajo Ct
 Louisville, KY 40207

Name of Employer

Garst-Receveur
 Construction Co.

Occupation

President

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$350.00

\$350.00

Receipt For: ☒ Primary ☒ General

☐ Other (specify): 1984 Primary & Gen

Aggregate Year-to-Date-\$ 700.00

C. Full Name, Mailing Address and ZIP Code

Jan M. Reeves
 2911 Seneca Park
 Louisville, KY 40205

Name of Employer

Mason Rudd

Occupation

Ex. Secretary

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Robert W. Rounsavall, III
 7501 Covered Bridge Road
 Prospect, KY 40059

Name of Employer

Dixie Warehouse
 Cartage Co.

Occupation

President

Date (month,
day, year)

4/20/83

Amount of Each
Receipt This Period

\$200.00

\$150.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 350.00

E. Full Name, Mailing Address and ZIP Code

George B. Sanders
 20 Stonebridge Rd.
 Louisville, KY 40207

Name of Employer

Self

Occupation

Doctor

Date (month,
day, year)

1/05/83

6/30/83

Amount of Each
Receipt This Period

\$200.00

\$100.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 300.00

F. Full Name, Mailing Address and ZIP Code

R.E. Smith
 13005 Covered Bridge Rd.
 Prospect KY 40059

Name of Employer

Self

Occupation

Date (month,
day, year)

6/30/83

6/30/83

Amount of Each
Receipt This Period

1000.00

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

Richard D. Thurman
 10000 Shelbyville Road
 Louisville KY 40203

Name of Employer

Self

Occupation

Real Estate

Date (month,
day, year)

6/30/83

6/30/83

Amount of Each
Receipt This Period

\$1000.00

\$1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 2000.00

SUBTOTAL of Receipts This Page (optional)

\$6850.00

TOTAL This Period (last page this line number only)

8
5
1
5
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8

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Henry C. Wagner
 7106 Greengate Court
 Louisville, KY 40222

Name of Employer

Jewish Hospital

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt this Period

\$500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

M.M. Weiss, Jr.
 250 E. Liberty
 Louisville, KY 40202

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$300.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Occupation

Doctor

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Thomas W. Wolff
 250 E. Liberty St, #10001
 Louisville, KY 40202

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Occupation

Doctor

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Joseph B. Woodlief
 331 Zorn Avenue, #5
 Louisville, KY 40206

Name of Employer

Glenmore Distilleries

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$300.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Occupation

Executive

Aggregate Year-to-Date-\$ 300.00

E. Full Name, Mailing Address and ZIP Code

John J. Werst, Jr.
 1401 Northwind Road
 Louisville, Ky. 40207

Name of Employer

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$300.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Occupation

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

\$1,650.00

TOTAL This Period (last page this line number only)

9
5
1
5
0
0
0
5
1
5
9

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11a
(Use separate schedule(s) for each
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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. K. Paradis 3919 Brookfield Avenue Louisville, Ky. 40207		5/11/83	\$200.00
	Occupation	5/11/83	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General		Aggregate Year-to-Date-\$ 400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary H. Paradis P.O. Box 215 Goshen, Ky. 40026	Parahart Corp.	5/11/83	\$200.00
	Occupation	5/11/83	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.		Aggregate Year-to-Date-\$ 400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas Wilkerson 2715 Diana Drive Sellersburg, IN. 47172	Luckett & Farley Architects	6/1/83	\$200.00
	Occupation		\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General		Aggregate Year-to-Date-\$ 400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cynthia M. Adelberg 94 Valley Road Louisville, KY. 40204		6/30/83	\$500.00
	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General		Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter K. Badenhausen, Jr. 364 Medical Towers South Louisville, KY 40202	Self	5/3/83	\$1,000.00
	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General		Aggregate Year-to-Date-\$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas K. Baer 2707 Citizens Plaza Louisville, KY 40202	Arthur Young & Co.	6/29/83	\$1,000.00
	Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General		Aggregate Year-to-Date-\$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold W. Cates 7 Arrowhead Road Louisville, Ky 40207	Self	6/27/83	\$1,000.00
	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General		Aggregate Year-to-Date-\$ 1200.00	
SUBTOTAL of Receipts This Page (optional)			4,700.00
TOTAL This Period (last page this line number only)			

93020051560

SCHEDULE A

ITEMIZED RECEIPTS

Page 27 of 32 for
LINE NUMBER 118
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ronald E. Kendall
350 Chanda Lane
New Albany, IN 47150

Name of Employer

Luckett & Farley
Architects

Date (month,
day, year)

6/1/83
6/1/83

Amount of Each
Receipt this Period

\$200.00
\$200.00

Occupation

Sr. Vice President

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 400.00

B. Full Name, Mailing Address and ZIP Code

Michael J. Kronn
3784 Jamaica Court
Lexington, KY. 40519

Name of Employer

Brandeis Machinery
& Supply Co.

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

Sales Executive

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$400.00

C. Full Name, Mailing Address and ZIP Code

Charles H. Leis
1010 Colonel Anderson Pkwy.
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

Aggregate Year-to-Date-\$ 400.00

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & General

D. Full Name, Mailing Address and ZIP Code

Mary D. Leis
1010 Colonel Anderson Pkwy.
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

Aggregate Year-to-Date-\$ 400.00

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & Gen.

E. Full Name, Mailing Address and ZIP Code

J.A. Paradis
P.O. Box 32230
Louisville, Ky. 40232

Name of Employer

Brandeis Equipment

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

Chairman of Board

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & Gen.

Aggregate Year-to-Date-\$ 400.00

F. Full Name, Mailing Address and ZIP Code

Mrs. J. A. Paradis
540 Fairfield Road
Louisville, Ky. 40206

Name of Employer

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

Homemaker

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & Gen.

Aggregate Year-to-Date-\$400.00

G. Full Name, Mailing Address and ZIP Code

Joseph A. Paradis, III
P.O. Box 32230
Louisville, Ky. 40232

Name of Employer

Brandeis Equipment

Date (month,
day, year)

5/11/83
5/11/83

Amount of Each
Receipt This Period

\$200.00
\$200.00

Occupation

President

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 Primary & Gen.

Aggregate Year-to-Date-\$ 400.00

SUBTOTAL of Receipts This Page (optional)

2,800.00

TOTAL This Period (last page this line number only)

1561002038

SCHEDULE A

ITEMIZED RECEIPTS

Page 28 of 32 for
LINE NUMBER 11a
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph C. Corradino 1505 Sylvan Court Louisville, Ky. 40205	Schimpeler-Corradino	6/29/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Consultant	Aggregate Year-to-Date-\$1,000.00	
B. Full Name, Mailing Address and ZIP Code Samuel G. Dabney P.O. Box 4547 Louisville, Ky. 40204	Standard Foods	6/17/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Businessman	Aggregate Year-to-Date-\$1,000.00	
C. Full Name, Mailing Address and ZIP Code Watson B. Dabney 545 S. Third Street Louisville, Ky.	Hilliard-Lyons	5/5/83 5/5/83	\$500.00 \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Sr. Exec.	Aggregate Year-to-Date-\$1,000.00	
D. Full Name, Mailing Address and ZIP Code William W. Davis 310 W., Liberty, Suite 403 Louisville, Ky. 40202	Self	6/8/83	\$450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Attorney	Aggregate Year-to-Date-\$450.00	
E. Full Name, Mailing Address and ZIP Code Lawrence E. Forgy, Jr. 213 Chinoe Road Lexington, Ky. 40502	Self	6/7/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Attorney	Aggregate Year-to-Date-\$1,000.00	
F. Full Name, Mailing Address and ZIP Code James L. Gibson 1836 Yale Drive Louisville, Ky. 40205	Bickel-Gibson Assoc. Architects, Inc.	6/20/83	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Architect	Aggregate Year-to-Date-\$300.00	
G. Full Name, Mailing Address and ZIP Code K. E. Hall 820 Rugby Place Louisville, Ky. 40222	Hall Contracting	6/20/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation President	Aggregate Year-to-Date-\$1,000.00	
SUBTOTAL of Receipts This Page (optional)			5,750.00
TOTAL This Period (last page this line number only)			

93020051562

SCHEDULE A

ITEMIZED RECEIPTS

Page 29 of 32 for
LINE NUMBER 11a
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William E. Hellman 3225 Murray Hill Pike Louisville, Ky. 40222	Stites, McElwain & Fowler Occupation: Attorney	6/17/83	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 500.00		
B. Full Name, Mailing Address and ZIP Code Weldon Hewitt Mockingbird Valley-Overbrook RD. Louisville, Ky. 40207	Audio Systems Occupation: Principal	5/18/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Henry B. Huff 170 Westwind Rd. Louisville, Ky. 40207	Self Occupation: Attorney	8/17/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Samuel M. Klein 6005 Orion Road Louisville, Ky. 40222	Bank of Louisville Occupation: Chief Exec. Officer	6/17/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Patrick R. Lancaster 1100 Bluegrass Pkwy. Louisville, Ky. 40299	Lantech, Inc. Occupation: President	6/22/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code John S. Lenihan 1400 Willow Louisville, Ky. 40204	Dixie Beer Dist. Occupation: President	5/2/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Paul Lichtefeld 991 Logan Street Louisville, Ky. 40204	Lichtefeld Const. Co. Occupation: Owner	6/29/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Aggregate Year-to-Date-\$ 1,000.00		
SUBTOTAL of Receipts This Page (optional)			6,500.00
TOTAL This Period (last page this line number only)			

93020051563

SCHEDULE A

ITEMIZED RECEIPTS

Page 31 of 32 for
LINE NUMBER 117
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. W. F. Rubel Mockingbird Valley Road Louisville, Ky. 40207		5/2/83	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Housewife	Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mason C. Rudd 7915 Westover Dr. Prospect, Ky. 40059	Name of Employer Self	Date (month, day, year) 6/30/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Construction Co. Pres	Aggregate Year-to-Date—\$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Allan B. Solomon 3203 Innes Trace Court Louisville, Ky. 40222	Name of Employer Barnett & Alagia	Date (month, day, year) 6/21/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Attorney	Aggregate Year-to-Date—\$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Larry J. Steinberg 510 W. Broadway Louisville, Ky. 40202	Name of Employer Touche Ross & Co.	Date (month, day, year) 6/20/83	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation CPA	Aggregate Year-to-Date—\$ 500.00	
E. Full Name, Mailing Address and ZIP Code W. W. Townes 542 Garden Dr. Louisville, Ky. 40206	Name of Employer Self	Date (month, day, year) 6/23/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Attorney	Aggregate Year-to-Date—\$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code William T. Warner 730 W. Main Street Louisville, Ky. 40202	Name of Employer Self	Date (month, day, year) 6/1/83	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General	Occupation Attorney	Aggregate Year-to-Date—\$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
SUBTOTAL of Receipts This Page (optional)			5,500.00
TOTAL This Period (last page this line number only)			

565150050302005

SCHEDULE A

ITEMIZED RECEIPTS

Page 32 of 32 for
LINE NUMBER 11a
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert S. Allison 410 Club Lane Louisville, Ky. 40207	Doe-Aderson Adv.	6/30/83 6/30-83	\$200.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 General & Primary	President		
		Aggregate Year-to-Date-\$ 400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, Ky. 40205	Daunhauer Plumbing	3/31/83 5/27/83	\$1000.00 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Contractor		
		Aggregate Year-to-Date-\$ 1050.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dennis C. Dewitt 401 Dorsey Way Louisville, Ky. 40223	Luckett & Farley Architects	6/1/83 6/1/83	\$200.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Architect		
		Aggregate Year-to-Date-\$ 400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Virginia B. Glass 4002 Ormond Road Louisville, Ky. 40207		6/30/83 6/30/83	\$200.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Homemaker		
		Aggregate Year-to-Date-\$ 400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
W. C. Glass 4002 Ormond Road Louisville, Ky. 40207	Arctic, Inc.	6/30/83 6/30/83	\$200.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	President		
		Aggregate Year-to-Date-\$ 400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John C. Johnston 704 Cadagon Court Louisville, Ky. 40222	Brandeis Machinery and Supply Corp.	5/11/83 5/11/83	\$200.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	V.P. & Gen. Sales Mgr.		
		Aggregate Year-to-Date-\$ 400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Morton Kasdan PO Box 6095 Louisville, Ky. 40206	Self	1/6/83p 6/30/83g	\$1,000.00 \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen.	Doctor		
		Aggregate Year-to-Date-\$ 1100.00	
SUBTOTAL of Receipts This Page (optional)			4,150.00
TOTAL This Period (last page this line number only)			164,875.00

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SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 116
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

General E. P.A.C.
Fairfield, CT 06431

Name of Employer

Date (month,
day, year)

6/28/83

Amount of Each
Receipt this Period
\$500.00

Occupation

Political Action Com.

Aggregate Year-to-Date-\$ 500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

B. Full Name, Mailing Address and ZIP Code

Coopers & L. P.A.C.
1800 M. Street N.W.
Washington, D.C. 20036

Name of Employer

Coopers & Lybrand
C.P.A.'s

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period
\$250.00

Occupation

Political Action Com.

Aggregate Year-to-Date-\$ 250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

The Life Underwriters P.A.C.
1922 F. Street N.W.
Washington, D.C. 20006

Name of Employer

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period
\$1500.00

Occupation

Political

Action Com.

Aggregate Year-to-Date-\$ 1500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

\$2,250.00

TOTAL This Period (last page this line number only)

\$2,250.00

R 3 0 2 0 0 5 1 5 6 7

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Cash Equivalent Fund, Inc.
 120 S. LaSalle St.
 Chicago, Ill. 60603

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

Occupation

1-19-83

1,197

Receipt For:

☐ Primary

☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 1,197

B. Full Name, Mailing Address and ZIP Code

Bank of Louisville
 500 West Broadway
 Louisville, Ky. 40202

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Monthly,
 Feb. -
 June

6,240

Receipt For:

☐ Primary

☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 6,240

C. Full Name, Mailing Address and ZIP Code

Liberty National Bank
 416 West Jefferson St.
 Louisville, Ky. 40202

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Monthly,
 Feb. -
 June

2,292

Receipt For:

☐ Primary

☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 2,292

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

9,729

TOTAL This Period (last page this line number only)

9,729

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 4 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page.)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ABC Printing Company 3520 College Drive Jeffersontown, Ky. 40059	Printing	1-3-83	862
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1-26-83	178
	<input type="checkbox"/> Other (specify):	4-2-83	42
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communications, Inc. 456 West 43rd St. New York, N.Y. 10030	Media & campaign consulting	4-29-83	2,000
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5-31-83	2,000
	<input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cybernetics & Systems, Inc. 500 Water Street Jacksonville, Fla. 32202	Computer programming and services	4-2-83	2,636
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5-5-83	1,583
	<input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dulworth Office Equipment 204 E. Market St. Louisville, Ky. 40202	File cabinets	2-16-83	750
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Faversham World Travel 2843 Brownsboro Road Louisville, Ky. 40206	Air travel	6-15-83	256
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Memphis, Tenn. 38101	1982 income tax-Form 1120POL	3-15-83	722
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kentucky Press Service, Inc. 332 Capitol Avenue Frankfort, Ky. 40601	Clipping service	5-5-83	201
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
R. Kern 4510 Mt. Vernon Road Louisville, Ky. 40220	Air Travel	2-16-83	50
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4-2-83	172
	<input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kingfish Restaurants 140 N. 6th St. Louisville, Ky. 40202	Food for rally	6-16-83	332
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			11,784
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 4 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Main Travel Agency 730 W. Main St. Louisville, Ky. 40202	Air travel	1-12-83	482
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4-2-83	484
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mitch McConnell Jefferson County Courthouse Louisville, Ky. 40202	Luncheons and travel reimbursement	4-2-83	111
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6-15-83	199
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Mobley Jefferson County Courthouse Louisville, Ky. 40202	Travel, food, printing and office supplies	2-16-83	254
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2-21-83	294
	<input type="checkbox"/> Other (specify):	3-18-83	219
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
-Continued-		4-2-83	10
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4-14-83	212
	<input type="checkbox"/> Other (specify):	6-14-83	258
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Odell, Roper & Associates, Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, Md. 20814	Service fee, printing and mailing	1-3-83	1,500
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1-3-83	1,319
	<input type="checkbox"/> Other (specify):	1-4-83	5,901
		1-21-83	1,500
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
-Continued-		2-16-83	1,736
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4-2-83	3,325
	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joseph G. Schiff 1708 Clayton Road Louisville, Ky. 40205	Telephone and travel reimbursement	1-3-83	45
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1-26-83	111
	<input type="checkbox"/> Other (specify):	2-18-83	58
		3-2-83	98
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
-Continued-		3-15-83	70
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3-31-83	53
	<input type="checkbox"/> Other (specify):	4-29-83	96
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michael Shea 4601 Lincoln Road Louisville, Ky. 40220	Travel reimbursement	3-8-83	221
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			18,657
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 4 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shively Newsweek, Inc. 4639 Dixie Highway Shively, Ky. 40216	Printing	1-3-83	659
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code SP Communications P. O. Box 974 Burlingame, CA 94010	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Long distance telephone	1-26-83	54
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2-28-83	121
	<input type="checkbox"/> Other (specify):	3-23-83	61
C. Full Name, Mailing Address and ZIP Code -Continued-	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		5-3-83	62
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5-24-83	104
	<input type="checkbox"/> Other (specify):	5-24-83	6
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, Ky. 40201	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage & postal charges	1-3-83	100
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1-3-83	40
	<input type="checkbox"/> Other (specify):	1-3-83	115
E. Full Name, Mailing Address and ZIP Code -Continued-	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		1-18-83	100
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1-31-83	100
	<input type="checkbox"/> Other (specify):	2-24-83	150
F. Full Name, Mailing Address and ZIP Code -Continued-	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		3-2-83	100
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3-8-83	200
	<input type="checkbox"/> Other (specify):	3-18-83	100
G. Full Name, Mailing Address and ZIP Code -Continued-	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		4-20-83	200
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5-9-83	200
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code -Continued-	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		5-10-83	1,750
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5-11-83	1,340
	<input type="checkbox"/> Other (specify):	5-24-83	100
I. Full Name, Mailing Address and ZIP Code Xerox Corp. 10001 Linn Station Road Louisville, Ky. 40223	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Maintenance agreement	6-7-83	26
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	6-7-83	100
	<input type="checkbox"/> Other (specify):	6-27-83	200
SUBTOTAL of Disbursements This Page (optional)			6,527

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 4 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Zip Print 424 W. Muhammad Ali Blvd. Louisville, Ky. 40202	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Printing	1-3-83	46
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1-3-83 2-16-83	26 49
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		5-5-83	152
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5-12-83	82
-Continued-			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			355
TOTAL This Period (last page this line number only)			37,323

830051572

SCHEDULE D
(Revised 3/80)

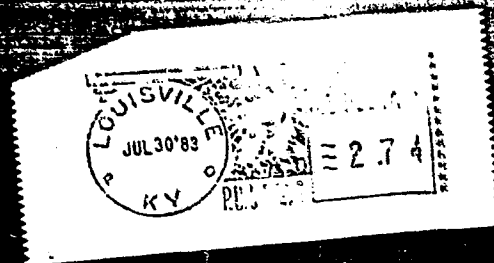
DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications, Inc. 456 West 43rd St. New York, N.Y. 10036	-0-	80,000	4,000	76,000
Nature of Debt (Purpose): Media and campaign consulting				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, Ky. 40299	583	2,405	1,082	1,906
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Associates 7316 Wisconsin Ave., Suite 507 Bethesda, Md. 20814	8,720	6,561	15,281	-0-
Nature of Debt (Purpose): Service fee, printing and mailing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shively Newsweek, Inc. 4939 Dixie Highway Shively, Ky. 40216	659	703	659	703
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Cybernetics & Systems, Inc. 500 Water Street Jacksonville, Fla. 32202	-0-	5,643	4,219	1,424
Nature of Debt (Purpose): Computer programming and services				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				80,033
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				80,033

93020051573

496
KY 40201



Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

REGISTERED

3 622 365

MAIL

WILLIAM F. HILDENBRAND
SECRETARY

OFFICE OF PUBLIC RECORDS
119 D STREET NE. No. A623
WASHINGTON, D.C. 20510
(202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20510

ALICIA RAE FISHER
SUPERINTENDENT

THE PRECEDING REPORT WAS RECEIVED: _____

_____ HAND DELIVERED _____
✓ _____ CERTIFIED _____ 7-30-83
_____ REGISTERED _____
_____ FEDERAL EXPRESS _____
_____ EXPRESS MAIL _____

83020051575



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20543

NOV 21 1984 HQ-5

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: Year End Report (7/1/83-12/31/83)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. An individual or a political committee, other than a multicandidate committee may not make contributions to a candidate for Federal office in excess of \$1,000 per election. If you have received a contribution(s) which exceeds the limits, the Commission recommends that you refund to the donor(s) the amount in excess of \$1,000. The Commission should be notified in writing if a refund is necessary. In addition, any refund should appear on Line 20 of the Detailed Summary Page of your next report. (2 U.S.C. 441a(a) and (f))

The term "contribution" includes any gift, subscription, loan, advance, or deposit of money or anything of value made by any person for the purpose of influencing any election for Federal office.

If the contribution(s) in question was incorrectly reported and/or you have additional information regarding the contributor(s), you may wish to submit documentation for the public record. Please amend your report with the clarifying information.

Although the Commission may take further legal steps concerning the acceptance of an excessive contribution(s), prompt action by you to refund the excessive amount will be taken into consideration.

44033144381

Any amendment or clarification should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9930. My local number is (202) 523-4048.

Sincerely,



Gregory Swanson
Reports Analyst
Reports Analysis Division

84033144382

Page 1 of 1

STRATEGIC RECEPTION

Any information received from such sources shall be furnished to the committee as soon as it is received for the purpose of including such information in the report of the committee. Any person who knowingly and willfully furnishes false information to the committee shall be subject to the penalties provided in section 1001 of the United States Code.			
Name of Employer (or Full Name of Employer if Full)			
McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code LIB P.A.C. Liberty United Bancorp, I P. O. Box 32500 Louisville, KY 40232		Name of Employer Duration Political Action Committee Aggregate Year to Date - \$1500.00	Date Month, day, year 12-16-81 Amount of Cash Received This Period \$1500.00
Source: Full Name, Mailing Address and ZIP Code McConnell Senate Committee McConnell Senate Committee 1984 Primary		Name of Employer Duration Political Action Committee Aggregate Year to Date - \$1500.00	Date Month, day, year 12-7-81 12-22-81 Amount of Cash Received This Period \$100.00 \$1250.00
General Electric P.A.C. Fairfield Connecticut 06431		Name of Employer Duration Political Action Committee Aggregate Year to Date - \$1500.00	Date Month, day, year 12-7-81 12-22-81 Amount of Cash Received This Period \$100.00 \$1250.00
Source: Full Name, Mailing Address and ZIP Code General Electric P.A.C. 1984 Primary		Name of Employer Duration Political Action Committee Aggregate Year to Date - \$1500.00	Date Month, day, year 12-7-81 12-22-81 Amount of Cash Received This Period \$100.00 \$1250.00
B. Full Name, Mailing Address and ZIP Code Republican Majority Fund 227 K.A. Ave., K.E. 0220 Washington, D.C. 20002		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year 11-11-81 Amount of Cash Received This Period \$5,000.00
Source: Full Name, Mailing Address and ZIP Code Republican Majority Fund 1984 Primary		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year 11-11-81 Amount of Cash Received This Period \$5,000.00
C. Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
Source: Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
D. Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
Source: Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
E. Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
Source: Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
F. Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
Source: Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
G. Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
Source: Full Name, Mailing Address and ZIP Code 		Name of Employer Duration Aggregate Year to Date - \$1500.00	Date Month, day, year Amount of Cash Received This Period
SUBTOTAL of Receipts This Page (Enter all figures in dollars and cents)		\$7,850.00	
TOTAL (The Total of All Receipts This Page and All Other Pages)			

MICHAEL SHEA, FINANCE DIRECTOR
1941 BISHOPS LANE
LOUISVILLE KY 40218 12AM

Western Union Mailgram



4-022588S133 05/12/84 ICS IPMBNGZ CSP WHSB
5024593134 MGM TDBN LOUISVILLE KY 92 05-12 0113P EST

SECRETARY OF THE SENATE
UNITED STATES SENATE
WASHINGTON DC 20510

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 14 AM 11:55
HAND DELIVERED ☐

DEAR SIR
ON MAY 11, 1984 WE RECEIVED AND DEPOSITED THE FOLLOWING CONTRIBUTIONS
TO OUR PRIMARY ELECTION ACCOUNT: DON HUFFMAN \$1,000, KIP HUFFMAN
\$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000, FIRST
KENTUCKY NATIONAL CORP \$1,000, OSCAR PENN \$1,000, JAMES PATTERSON II
\$1,000, CHARLOTTE ELAM \$1,000. WE ALSO RECEIVED THE FOLLOWING
CONTRIBUTIONS TO OUR GENERAL ELECTION ACCOUNT KIP HUFFMAN \$1,000, DON
HUFFMAN \$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000. OUR
FEC I.D. NUMBER IS C00155051.

SINCERELY,

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE

13:17 EST

MGMCOMP

5241 (R. 7/82)

TO REPLY BY MAILGRAM MESSAGE, SEE REVERSE SIDE FOR WESTERN UNION'S TOLL - FREE PHONE NUMBERS

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 MAY 18 PM 2:48

HAND DELIVERED ☒

May 15, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

\$25,000 loan from the candidate, Mitch McConnell

General Account:

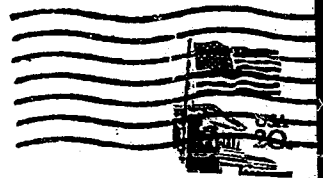
Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

itch
McConnell
is
U.S. Senate

Box 1496
Louisville, Kentucky 40201



OK

8402011

WILLIAM F. HILDENBRAND
SECRETARY

Alicia Rae Fisher
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: May 16, 1984

 CERTIFIED

 REGISTERED

 FEDERAL EXPRESS

 EXPRESS MAIL

84020110533

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 21 PM 1:51
HAND DELIVERED ☒

May 15, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

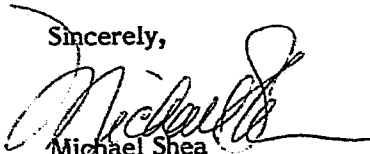
\$1000 contributions: Don Huffman, Kip Huffman, Sharon Patterson, Deborah Patterson, First Kentucky National Corp., Oscar Penn, James Patterson II, and Charlotte Elam.

General Account:

\$1000 contributions: Don Huffman, Kip Huffman, Sharon Patterson, Deborah Patterson.

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

MAILGRAM SERVICE CENTER
MIDDLETOWN, VA. 22645
12AM

Western Union Mailgram



4-0225885133002 05/12/84 ICS 1PMBN3Z CSP LVLB
1 5024593134 MGM TDBN LOUISVILLE KY 05-12 0113P EST

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE
1941 BISHOPS LANE
LOUISVILLE KY 40213

THIS IS A CONFIRMATION COPY OF THE FOLLOWING MESSAGE:

5024593134 MGM TDBN LOUISVILLE KY 92 05-12 0113P EST
ZIP
SECRETARY OF THE SENATE
UNITED STATES SENATE
WASHINGTON DC 20510

DEAR SIR
ON MAY 11, 1984 WE RECEIVED AND DEPOSITED THE FOLLOWING CONTRIBUTIONS
TO OUR PRIMARY ELECTION ACCOUNT: DON HUFFMAN \$1,000, KIP HUFFMAN
\$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000, FIRST
KENTUCKY NATIONAL CORP \$1,000, OSCAR PENN \$1,000, JAMES PATTERSON II
\$1,000, CHARLOTTE ELAM \$1,000. WE ALSO RECEIVED THE FOLLOWING
CONTRIBUTIONS TO OUR GENERAL ELECTION ACCOUNT KIP HUFFMAN \$1,000, DON
HUFFMAN \$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000. OUR
FEC I.D. NUMBER IS C00155031.

SINCERELY,

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE

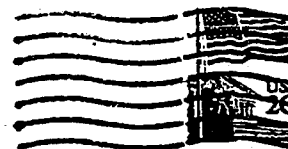
1319 EST

MGMCOMP MGM

TO REPLY BY MAILGRAM MESSAGE. SEE REVERSE SIDE FOR WESTERN UNION'S TOLL - FREE PHONE NUMBERS

itch
McConnell
10 - **U.S. Senate**

Box 1496
Louisville, Kentucky 40201



OK

84020111

840211253

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE

1984 MAY 22

HAND DELIVERED

RECEIVED AT THE FEC

84 MAY 22 9:48

May 15, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

\$25,000 loan from the candidate, Mitch McConnell

General Account:

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

ch
cConnell
U.S. Senate

x 1496
le, Kentucky 40201



8402011

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

NAVY BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0321

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 18, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020111467

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED,
CLERK OF THE SENATE

1984 MAY 24 AM 11:45

HAND DELIVERED ☐

May 21, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

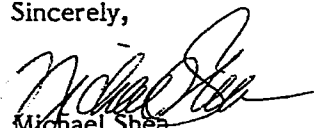
Primary Account:

\$1,000 from Mr. F. Evans Farwell; \$1,000 from Prudential PAC; and \$3,000 from R.P.A.C. (National Association Realtors)

General Account:

Our FEC I.D. number is C00155051.

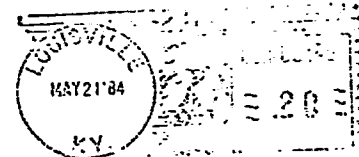
Sincerely,


Michael Shea
Finance Director

Rich
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201

OK



8402011

Alicia Rae Fisher
SUPERINTENDENT

**HART BUILDING
SUITE 232
WASHINGTON, D.C. 20001
PHONE: 202-224-0300**

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

8402011716

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE FEC ✓

84 MAY 25 AM 11:26

SECRETARY OF THE SENATE

1984 MAY 15

HANDLED BY REC □

May 23, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

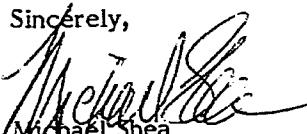
Primary Account:

\$1,000 from Mr. David Jones; \$1,000 from Mrs. Molly Leonard

General Account:

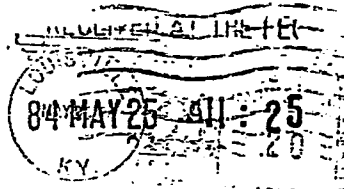
Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Witch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



8402011

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 23, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020112152

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED:
CLERK OF THE SENATE
1984 MAY 25 AM 11:46
HAND DELIVERED ☒

May 21, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

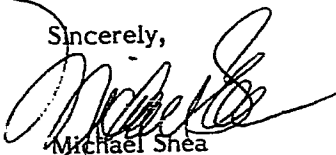
Primary Account:

\$1,000 from Mr. F. Evans Farwell; \$1,000 from Prudential PAC; and \$3,000 from R.P.A.C. (National Association Realtors)

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



Michael Shea
Finance Director

McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



63

1102048

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0311

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 21, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020112507

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 MAY 29 PM 2:32

HAND DELIVERED ☐

May 24, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

\$1,000 from Mr. Ricard Ohrstrom; \$1,000 from Arlene Flahavin; \$1,000 from Dalton J. Woods; \$500 from Dr. Robert E. Windom

General Account:

Our FEC I.D. number is C00155051.

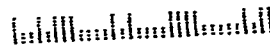
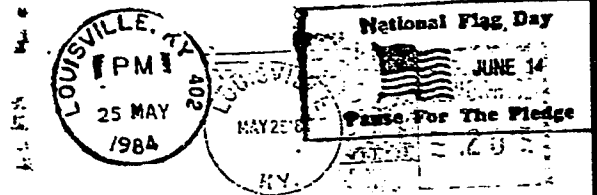
Sincerely,


Michael Shea
Finance Director

5
h
McConnell
U.S. Senate

1496
e, Kentucky 40201

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8-1-55

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 29 AM 10:56
HAND DELIVERED L

May 23, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

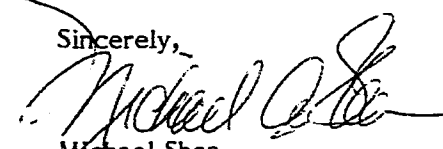
Primary Account:

\$1,000 from Mr. David Jones; \$1,000 from Mrs. Molly Leonard

General Account:

Our FEC I.D. number is C00155051.

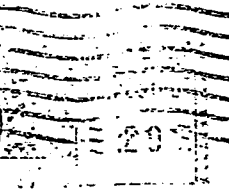
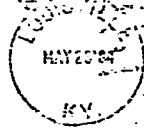
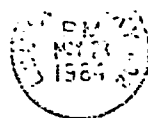
Sincerely,


Michael Shea
Finance Director

itch
McConnell
U.S. Senate

Box 1496
ville, Kentucky 40201

OF R



WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20
PHONE: 202-224-03

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: May 23, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020112358

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE FEC

RECEIVED.
SENATE OF THE SENATE

84 MAY 1 8:53

1984 JUN -1 PM 2:58

HAND DELIVERED ☐

May 29, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

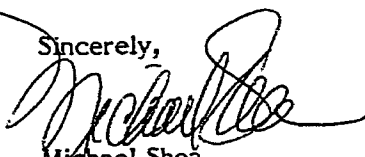
Primary Account:

\$1,000 from the Tennessee Gas Subcommittee of the Tenneco Employees Good Government Fund

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



Michael Shea
Finance Director

McConnell
U.S. Senate

496
Kentucky 40201

840201314



SUPERINTENDENT

**HART BUILDING
SUITE 232
WASHINGTON, D.C.
PHONE: 202-224-**

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 23, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

8402013147

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 JUN -4 AM 10:47
HAND DELIVERED ☐

May 29, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

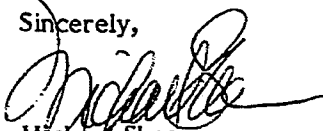
Primary Account:

\$1,000 from the Tennessee Gas Subcommittee of the Tenneco Employees Good Government Fund

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



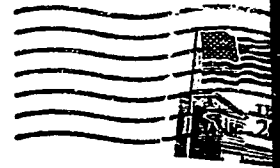
Michael Shea
Finance Director

Mitch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201

84020113

OPR



AUCIA RAE FISHER
SUPERINTENDENT

**HART BUILDING
SUITE 232**

**Suite 232
WASHINGTON, D.C.
PHONE: 202-224-**

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

841020113191

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 26 AM 9:19

HAND DELIVERED ☐

October 22, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

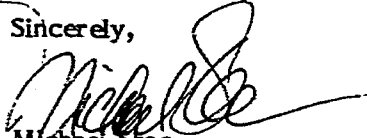
Primary Account:

General Account:

\$1000 each from: Harold K. Phillips, Bonnie Thornton, Cumberland County
Republican Organization

Our FEC I.D. number is C00155051.

Sincerely,



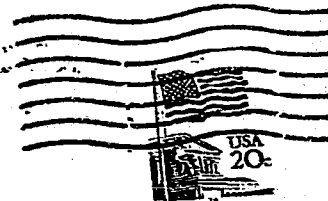
Michael Shea
Finance Director

7

McCConnell
U.S. Senate

1496
Kentucky 40201

840202



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

THE PRECEDING DOCUMENT (S) WAS:

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Date of Receipt

☐ INSIDE MAIL

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☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK Oct. 22, 1984

AND OR DATE OF RECEIPT

34020251488

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE
1984 OCT 22 PM 2: 28
HAND DELIVERED ☐

October 19, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

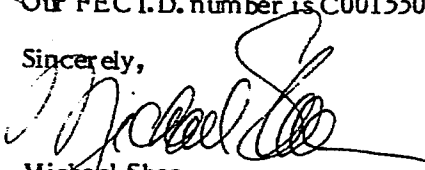
Primary Account:

General Account:

\$1000 each from: Linda Reece, Mabel Barnett, Donald Perkins, William Lockridge, Michael Dicken

Our FEC I.D. number is C00155051.

Sincerely,

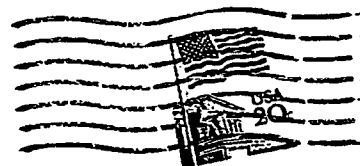

Michael Shea
Finance Director

McCConnell
U.S. Senate

496
Kentucky 40201

040202310

OK



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Suite 232
WASHINGTON, D.C. 20510
Phone: 202-224-0322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

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Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

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☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 19, 1984

AND OR DATE OF RECEIPT

8402023331

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1994 OCT 25 PM 3:00

HAND DELIVERED ☐

October 23, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

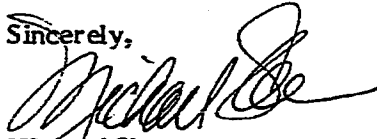
Primary Account:

General Account:

\$1000 each from: William Yarmuth, Richard M. Scaife, McGraw-Edison PAC

Our FEC LD. number is C00155051.

Sincerely,

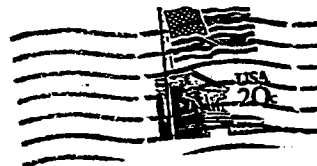


Michael Shea
Finance Director

34020251489

Connell
U.S. Senate

496
Kentucky 40201



OPR

84020251

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE 202-224-0322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

☐ INSIDE MAIL

Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 23, 1984

AND OR DATE OF RECEIPT

844020251491

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE FEC

RECEIVED
SECRETARY OF THE SENATE

04 OCT 26 4:48

1984 OCT 23 PM 2:53

HAND DELIVERED ☐

October 23, 1984

Federal Elections Commission
Washington, D.C. 20463

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

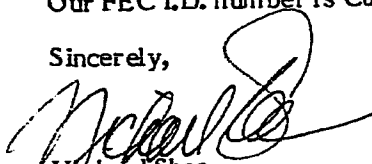
Primary Account:

General Account:

\$1000 each from: William Yarmuth, Richard M. Scaife, McGraw-Edison PAC

Our FEC LD. number is C00155051.

Sincerely,

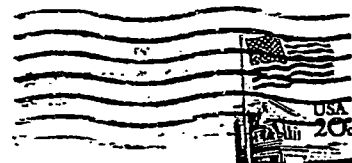


Michael Shea
Finance Director

McConnell
U.S. Senate

496-17
Kentucky 40201

84020225325



31 OCT 26 A 8:48

THE REC

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

☐ INSIDE MAIL

 Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 23, 1984

AND OR DATE OF RECEIPT

84020252266

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 26 AM 11:16

HAND DELIVERED ☐

October 24, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

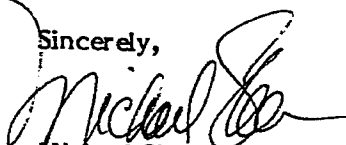
Primary Account:

General Account:

\$1000 each from: J.V. Garner, Julia McConnell, A.M. McConnell, William Baker, Carl Zoeller

Our FEC I.D. number is C00155051.

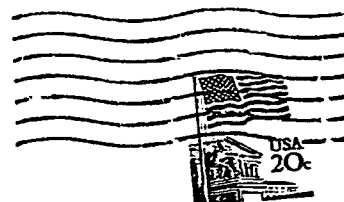
Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

496
Kentucky 40201

84020452248



OPR

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C.
PHONE: 202-224-

THE PRECEDING DOCUMENT (S) WAS:

☒ HAND DELIVERED Oct. 24. 1984
Date of Receipt

☐ INSIDE MAIL
Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS
Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION
Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☐ OTHER POSTMARK

AND OR DATE OF RECEIPT

84020252249

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 29 PM 3:22

HAND DELIVERED ☐

October 26, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

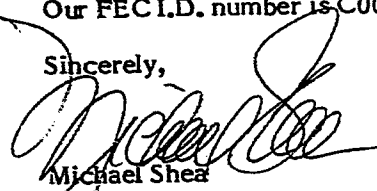
Primary Account:

General Account:

\$1000 each from: A.K. Bunger, George Krauser, Karen Casagrande, James G. Grissom, David Hall, Judy Hall, Will Perry, Motorola PAC, James Patterson III

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

6
Kentucky 40201

OPR



B 4 0 2 0 2 5 2 9 6 5

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

FORM 232
WASHINGTON, D.C.
PHONE: 202-224-

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

☐ INSIDE MAIL

 Date of Receipt

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RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☒ FIRST CLASS MAIL POSTMARKED 10/27/84

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☐ OTHER POSTMARK

☐ AND OR DATE OF RECEIPT

84020252966

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE
1984 OCT 31 AM 9:25
HAND DELIVERED ☐

October 29, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

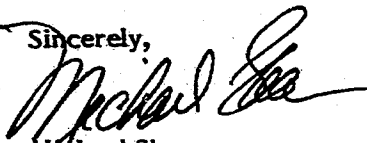
Primary Account:

General Account:

\$1000 each from: Charlotte Collins, Bruce H. Hooper, Martha Fortune, Bellpac, National Screw Machine PAC

Our FEC I.D. number is C00155051.

Sincerely,

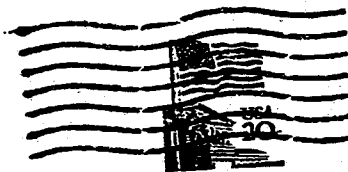


Michael Shea
Finance Director

Connell
U.S. Senate

96
Kentucky 40201

8402025



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Suite 232
Washington, D.C.
Phone: 202-224-4444

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Date of Receipt

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☒ OTHER

POSTMARK

Oct. 29, 1984

AND OR DATE OF RECEIPT

84020253387

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 NOV 5 PM 2 13

HAND DELIVERED ☐

November 2, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

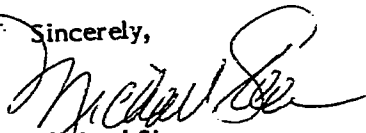
\$1000 from Mary Dudlo

General Account:

\$1000 each from: Bayard Sharp, W.S. Kilroy, Carlton Beal, W.S. Farish, Lewis A. Weil, Mary Dudlo, James Schwartz, J. Larry Nichols, Gordon McCoy, Eugene Rainis, Mrs. Bob Magnus, Bob Magnus, Charles Simas, Kathleen Smith, Wesley Morck, Eldridge Gerry, Harry Pierson, Mamie Williams, Henry Booth, John Hendershot, Jr., W.H. Crain, Kathleen Parriott, H.J. Casey, Frances Taylor, Arthur Musarra, Sarah Korein, Rudolf Wilhelm, Mrs. John Louis, Chet Leonhardt
\$2000 from UPSPAC

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 NOV 5 PM 2 13

HAND DELIVERED ☐

November 2, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

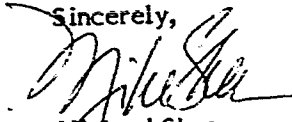
Primary Account:

General Account:

\$1000 each from: Mrs. E.J. Sansome, Jeri Yenawine, Jacque Parsley

Our FEC I.D. number is C00155051.

Sincerely,

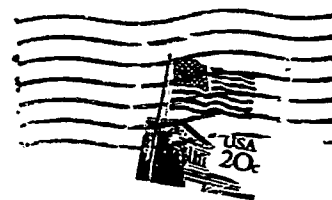

Michael Shea
Finance Director

Connell
U.S. Senate

ntucky 40201

84020260

OPR



United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

Room 232
WASHINGTON, D.C. 20540
Phone: 202-224-2322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED Date of Receipt

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☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER POSTMARK Nov. 2, 1984

 AND OR DATE OF RECEIPT

84020460190

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 NOV -5 PM 2:15

HAND DELIVERED ☐

October 31, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

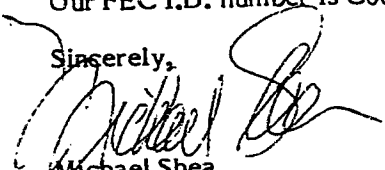
\$1000 from Diane Baron

General Account:

\$1000 each from: Diane Baron, Justine Milliken, Kathleen Ashe, Judith Raese, and \$3000 from LENPAC

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

6
Kentucky 40201

840202601

CAF 12



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

WASHINGTON, D.C. 20540
PHONE: 202-224-2800

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

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 Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER POSTMARK

 AND OR DATE OF RECEIPT

Oct. 31, 1914

8402020193

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 NOV 13 PM 2:03

HAND DELIVERED ☐

November 6, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

General Account:

\$1000 from: Ruth Ann Barry; \$2000 from Fund for A Conservative Majority; \$2620 from NCPAC

Our FEC I.D. number is C00155051.

Sincerely,

Michael Shea
Finance Director

909

U.S. SENATE COMMITTEE
P. O. BOX 1496
LOUISVILLE, KENTUCKY 40201

840202



OPR

UNITED STATES SENATE

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

FD-502 (2-7-55)

THE PRECEDING DOCUMENT (S) WAS:

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Date of Receipt

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Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

AND OR DATE OF RECEIPT

Nov. 8, 1984

84020260910

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 APR 30 PM 2:42

HAND DELIVERED ☒

April 26, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

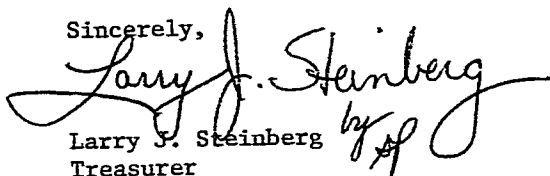
This letter is in reference to the April 15 quarterly report of the:

McConnell Senate Committee
FEC I.D. #C00155051

On page 2, schedule A, Itemized Receipts, the occupation of contributor "C" is listed as "owner", and employer is listed as "Rodes Department Store". That information is erroneous. The correct employer is self-employed, and correct occupation is financial counselor.

Sorry for the error.

Sincerely,


Larry J. Steinberg
Treasurer

LJS:MAS/sep

itch
McConnell
U.S. Senate

Box 1496
Covington, Kentucky 40201



OPR

Secretary of the Senate
United States Senate
Washington, D.C. 20510

840201023

REPORT OF RECEIPTS AND DISBURSEMENTS For an Authorized Committee

RECEIVED
CLERK OF THE SENATE
MAR 17 AM 9:26

(Summary Page)

1. Name of Committee (in Full) McConnell Senate Committee	2. FEC Identification Number C00155051
Address (Number and Street) P. O. Box 1496	3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
City, State and ZIP Code <input type="checkbox"/> Check if address is different than previously reported. Louisville, Kentucky 40201	

4. TYPE OF REPORT

☒ April 15 Quarterly Report ☐ Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

☐ July 15 Quarterly Report ☐ Thirtieth day report following the General Election
on _____ in the State of _____

☐ October 15 Quarterly Report ☐ Termination Report

☐ January 31 Year End Report

☒ July 31 Mid Year Report (Non-election Year Only)

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY		Column A This Period	Column B Calendar Year-to-Date
5. Covering Period	<u>January 1, 1984</u> Through <u>March 31, 1984</u>		
6. Net Contributions (other than loans):			
(a) Total Contributions (other than loans) (from Line 11e)		\$ 180,880	\$ 180,880
(b) Total Contribution Refunds (from Line 20d)		\$ 200	\$ 200
(c) Net Contributions (other than loans) (Subtract Line 6b from 6a)		\$ 180,680	\$ 180,680
7. Net Operating Expenditures:			
(a) Total Operating Expenditures (from Line 17)		\$ 353,338	\$ 353,338
(b) Total Offsets to Operating Expenditures (from Line 14)		\$ 12	\$ 12
(c) Net Operating Expenditures (Subtract Line 7b from 7a)		\$ 353,326	\$ 353,326
8. Cash on Hand at Close of Reporting Period (from Line 27)		\$ 221,663	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)		\$ 63,018	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg
Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

April 13, 1984
Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

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FEC FORM 3 (3/80)

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)**

Name of Committee (in Full) McConnell Senate Committee		Report Covering the Period:	
		From: 1/1/84	To: 3/31/84
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees		166,536	166,536
(Memo Entry Unitemized \$ 52,843)			
(b) Political Party Committees		951	951
(c) Other Political Committees		13,393	13,393
(d) The Candidate			
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11a, 11b, 11c and 11d)		180,880	180,880
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			
13. LOANS:			
(a) Made or Guaranteed by the Candidate			
(b) All Other Loans			
(c) TOTAL LOANS (add 13a and 13b)		12	12
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		3,598	3,598
15. OTHER RECEIPTS (Dividends, Interest, etc.)		184,490	184,490
16. TOTAL RECEIPTS (Add 11e, 12, 13c, 14 and 15)			
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		353,338	353,338
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			
(b) Of All Other Loans			
(c) TOTAL LOAN REPAYMENTS (add 19a and 19b)			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		200	200
(b) Political Party Committees			
(c) Other Political Committees		200	200
(d) TOTAL CONTRIBUTION REFUNDS (add 20a, 20b and 20c)			
21. OTHER DISBURSEMENTS		353,538	353,538
22. TOTAL DISBURSEMENTS (Add 17, 18, 19c, 20d and 21)			
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD		\$	390,711
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)		\$	184,490
25. SUBTOTAL (Add Line 23 and Line 24)		\$	575,201
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)		\$	353,538
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)		\$	221,663

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 West 43rd Street New York, NY 10036	71,341		30,741	40,600
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299		1,083		1,083
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sprint Accounts Receivable Dept. Pittsburgh, PA 15254		810		810
Nature of Debt (Purpose): Long distance telephone charges				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232		903		903
Nature of Debt (Purpose): Telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	22,272		6,074	16,198
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commerical Office Suppliers, Inc. 433 E. Market Street Louisville, KY 40202	534		534	-
Nature of Debt (Purpose): Office Supplies				
1) SUBTOTALS This Period This Page (optional)				59,594
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Assoc., Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, MD 20814	64,000		64,000	-
Nature of Debt (Purpose): Promotional mailing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299	4,602		1,381 2,233*	988
* Terminated a lease early.				
Nature of Debt (Purpose): Office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	3,480		1,044	2,436
Nature of Debt (Purpose): Office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				3,424
2) TOTAL This Period (last page this line only)				63,018
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 26 for
LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Ronald LeMaster P.O.Box 425 Southshore, KY 41175		Name of Employer Ron LeMaster Insurance, Inc. Occupation Insurance Agent	Date (month, day, year) 01-31-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Mr. C. L. Baird, Sr. 47 Harwood Road Louisville, KY 40222		Name of Employer Metal Sales Occupation Businessman	Date (month, day, year) 01-18-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 250.00
C. Full Name, Mailing Address and ZIP Code Mrs. Julia S. McConnell 12 Sequoyah Drive Shelbyville, KY 40065		Name of Employer self Occupation homemaker	Date (month, day, year) 01-19-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 200.00
D. Full Name, Mailing Address and ZIP Code Mr. Robert S. Bishop 410 N. University Blvd. Morehead, KY 40351		Name of Employer Self Employed Occupation Retail Drug Business	Date (month, day, year) 03-08-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 250.00
E. Full Name, Mailing Address and ZIP Code Mrs. Sara Giles Moore 3671 Tuxedo Road, N.W. Atlanta, GA 30305		Name of Employer self Occupation Investments	Date (month, day, year) 01-31-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 1000.00
F. Full Name, Mailing Address and ZIP Code Mrs. Emmler A. Neuman, Jr. 825 Walnut Hill Road Lexington, KY 40515		Name of Employer self Occupation homemaker	Date (month, day, year) 03-27-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 1000.00
G. Full Name, Mailing Address and ZIP Code Mr. Richard D. Cooper Fuller-Fouts Bldg. P. O. Box 1039 Hazard, KY 41707		Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 01-25-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date—\$	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional)			3700.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 26 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. A. W. Pennington P.O. Box 815 Lexington, KY 40501	Southern Salads	03-08-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Sally Q. Eggers 3719 Hillsdale Road Louisville, KY 40222	Self	01-27-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date—\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Joe M. Rodes 400 Mockingbird Valley Rd Louisville, KY 40207	Rodes Department Store	02-07-84	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$	300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205	Self	03-05-84	312.50
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$	312.50
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Mary M. Smock 3510 Hillsboro Road Apartment #2 Nashville, TN 37215	The Genesis Co., Inc.	03-22-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation advertising	Aggregate Year-to-Date—\$	2000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Elizabeth W. Hardwick 128 Council Road Louisville, KY 40207	self	01-31-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John E. Tarrant 3740 Upper River Road Louisville, KY 40207	Wyatt, Tarrant, and Combs	03-22-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$	500.00
SUBTOTAL of Receipts This Page (optional)			3362.50
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 26 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Elmer Holliday Box 60 Hazard, KY 41701	Perry Farm Center	03-30-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Naomi C. Voyles 2104 Eastern Parkway Louisville, KY 40204	Self	01-27-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. Fred G. Karem 2068 Von List Way Lexington, KY 40502	Shuffett, Kenton, Curry & Karem	01-26-84	900.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 900.00	
D. Full Name, Mailing Address and ZIP Code Mr. Sigmund Zilber 1995 NE 142nd Street North Miamia, FL 33181	Metro Taxi	03-31-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. John Alar 1025 Wellington North Louisville, KY 40207	Brown & Williamson Tab. Co.	01-19-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. John H. Baird Middle Bowles Addition P. O. Box 351 Pikeville, KY 41501	Baird and Baird, P.S.C.	01-05-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 750.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Julia S. McConnell 12 Sequoyah Drive Shelbyville, KY 40065	self	03-29-84	800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4950.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Robert L. Blair 11503 Main Street Middletown, KY 40243		Name of Employer self	Date (month, day, year) 02-21-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Insurance	Amount of Each Receipt this Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Beverly M. Morris 103 Walnut Ave. Paintsville, KY 41240		Name of Employer self	Date (month, day, year) 02-15-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Coal Producer	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Mrs. Emler A. Neuman, Jr. 825 Walnut Hill Road Lexington, KY 40515		Name of Employer self	Date (month, day, year) 03-27-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 2000.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Joseph C. Corradino 1505 Sylvan Court Louisville, KY 40205		Name of Employer self	Date (month, day, year) 03-30-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Doyleene R. Perry P. O. Box 34153 Houston, TX 77234		Name of Employer Self	Date (month, day, year) 03-05-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Homemaker	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. William W. Fandrich 802 S. 16th St. Murray, KY 42071		Name of Employer self	Date (month, day, year) 01-09-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation coal operator	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Clive Runnells 3900 Essex, Suite 1100 Houston, TX 77027		Name of Employer self	Date (month, day, year) 03-31-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation investor/rancher	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			6000.00
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Charles W. Goering 14 Leathers Rd Ft. Mitchell, KY 41017	Name of Employer Erlanger Lumber Company	Date (month, day, year) 02-29-84	Amount of Each Receipt this Period 250.00
	Occupation President		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		
B. Full Name, Mailing Address and ZIP Code Ms. Mary M. Smock 3510 Hillsboro Road Apartment #2 Nashville, TN 37215	Name of Employer The Genesis Co., Inc.	Date (month, day, year) 03-22-84	Amount of Each Receipt This Period 1000.00
	Occupation advertising		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 2000.00		
C. Full Name, Mailing Address and ZIP Code Mr. Lawrence Harms Box 1 Leitchfield, KY 42754	Name of Employer Newton Stone Company	Date (month, day, year) 03-02-84	Amount of Each Receipt This Period 1000.00
	Occupation Vice President		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Mr. James F. Tate 516 Rolling Lane Louisville, KY 40207	Name of Employer Falls City Industries	Date (month, day, year) 02-10-84	Amount of Each Receipt This Period 250.00
	Occupation Businessman		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		
E. Full Name, Mailing Address and ZIP Code Mr. William Hoskins 2029 Lakeshore Lexington, KY 40502	Name of Employer Lexington Building Supply	Date (month, day, year) 01-31-84	Amount of Each Receipt This Period 1000.00
	Occupation Owner-Self Employed		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
F. Full Name, Mailing Address and ZIP Code Mr. Cy Waddle 780 Jarvis Avenue Somerset, KY 42501	Name of Employer Somerset Refining	Date (month, day, year) 02-13-84	Amount of Each Receipt This Period 500.00
	Occupation President/Manager		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		
G. Full Name, Mailing Address and ZIP Code Mr. Albert P. Keller 800 Bering Drive #150 Houston, TX 77057	Name of Employer A.P. Keller Co.	Date (month, day, year) 02-22-84	Amount of Each Receipt This Period 250.00
	Occupation Owner		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		
SUBTOTAL of Receipts This Page (optional)			4250.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Richard D. Allen
 3112 Arden Road

Louisville, KY 40220

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

01-05-84

Amount of Each
 Receipt this Period

500.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Alfred L. Loomis, Jr.
 Bull Island Plantation

Bluffton, SC 29910

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. John H. Baird
 Middle Bowles Addition ..
 P. O. Box 351
 Pikeville, KY 41501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Baird and Baird, P.S.C.

Date (month,
 day, year)

02-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 750.00

D. Full Name, Mailing Address and ZIP Code

Mr. Sanford E. McCormick
 1200 Smith Street
 Suite 3600
 Houston, TX 77002

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

McCormick Oil & Gas Corp

Date (month,
 day, year)

03-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Darrell Brown
 Stonereath Farm
 P.O. Box 610
 Paris, KY 40361

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Stonereath Farm

Date (month,
 day, year)

02-29-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Owner

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Mary K. Morrison
 2400 Cedar Point Drive

Wayzata, MN 55391

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

01-31-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Ms. Janie G. Catron
 110 Padgett Street

Corbin, KY 40701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Frank H. Catron, P.S.C.

Date (month,
 day, year)

03-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Registered Nurse

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Larry Noe Taylor Co. Courthouse PO Box 15 321 E. Broadway Campbellsville, KY 42718	Name of Employer Taylor County	Date (month, day, year) 03-26-84	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Taylor County Attorney	Aggregate Year-to-Date—\$ 400.00	
B. Full Name, Mailing Address and ZIP Code Mr. T. H. Corson Box 504 600 Skyview Drive Middlebury, IN 46540	Name of Employer Coachmen Industries, Inc.	Date (month, day, year) 01-23-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. Robert J. Perry P. O. Box 34153 Houston, TX 77234	Name of Employer self	Date (month, day, year) 03-05-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date—\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Sarah Farish P. O. Box 626 Versailles, KY 40383	Name of Employer self	Date (month, day, year) 02-23-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Nancy M. Runnells 3900 Essex Lane, Suite 1100 Houston, TX 77027	Name of Employer self	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Helen K. Groves Silverbrook Farms Middlebrook, VA 24459	Name of Employer Silver Brook Farm	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. A. Clay Stewart 1313 Richmond Road Lexington, KY 40502	Name of Employer none	Date (month, day, year) 03-08-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			5150.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Sue Harms
 P. O. Box 1

Name of Employer

self

Date (month,
 day, year)

03-02-84

Amount of Each
 Receipt this Period

1000.00

Leitchfield, KY 42754

Occupation

homemaker

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. James Host
 c/o Host & Associates
 120 Kentucky Ave.
 Lexington, KY 40502

Name of Employer

Jim Host & Associates

Date (month,
 day, year)

02-10-84

Amount of Each
 Receipt This Period

500.00

Occupation

executive

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Henry C. Wagner
 22 Autumn Hill

Name of Employer

Jewish Hospital

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

500.00

Occupation

President

Prospect, KY 40059
 Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Name of Employer

Copy Corporation

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

350.00

Occupation

owner

Louisville, KY 40243
 Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 350.00

In-Kind
 Office Equipment

E. Full Name, Mailing Address and ZIP Code

Mr. Robert H. Allen
 Capital Bank Plaza
 333 Clay Street, Suite 4940
 Houston, TX 77002

Name of Employer

self

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

1000.00

Occupation

investor

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Virginia D. Loomis
 Bull Island Plantation
 Bluffton, SC 29910

Name of Employer

self

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Patricia W. Ballard
 2801 Rainbow Drive
 Louisville, KY 40206

Name of Employer

Greenbaum, Doll & McDonald

Date (month,
 day, year)

01-24-84

Amount of Each
 Receipt This Period

500.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 500.00

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Randal B. McDonald 711 Louisiana, Suite 700 Houston, TX 77002	Arthur Andersen & Company	03-05-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Darrell Brown Stonereath Farm P.O. Box 610 Paris, KY 40361	Stonereath Farm	02-29-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 2000.00	
C. Full Name, Mailing Address and ZIP Code Ms. Elaine Musselman 6414 Longview Louisville, KY 40207	Harris & Company	01-11-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Michael Chambers P.O. Box 3908 Evansville, IN 47737	General Oilfield Supply	03-31-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. William M. Noland Route 2 Harrodsburg, KY 40330	none	02-17-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, KY 40205	Dauenhauer Plumbing & Heating Co	02-22-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Contractor	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mr. Robert H. Pines 24 Central Park South New York, NY 10019	The R. H. Pines Corporation	01-31-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			4000.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. W. S. Farish P. O. Box 626 Versailles, KY 40383	Name of Employer self	Date (month, day, year) 02-23-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lane's End Farm	Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. David V. Hall 618 Hatherleigh Lane Louisville, KY 40222	Name of Employer Cardinal Medical Corp.	Date (month, day, year) 01-25-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Charles E. Stoll 527 Club Ln. Louisville, KY 40207	Name of Employer none	Date (month, day, year) 02-03-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Alvin Haynes P. O. Box 1635 Lexington, KY 40592	Name of Employer Alvin Haynes Trucking	Date (month, day, year) 03-28-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date-\$ 2000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Don Thompson Box 166 Henderson, KY 42420	Name of Employer Thompson, Bitt Service, Inc.	Date (month, day, year) 03-26-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 2000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Roy M. Huffington 307 Shadywood Houston, TX 77057	Name of Employer Roy M. Huffington, Inc.	Date (month, day, year) 03-06-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Int. Petroleum Oper.	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mr. Edward B. Weinberg 5018 Dunvegan Road Louisville, KY 40222	Name of Employer Greenebaum, Doll & McDonald	Date (month, day, year) 03-16-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			5750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. William Kirkland 1203 Pradero Box 256 Frankfort, KY 40601	Name of Employer Self	Date (month, day, year) 03-06-84	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Sidney J. Anderson 915 Col. Anderson Pkwy. Louisville, KY 40223	Name of Employer self	Date (month, day, year) 02-07-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homebuilder	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. Harry Lucas, Jr. P. O. Box 56467 Houston, TX 77256	Name of Employer self	Date (month, day, year) 03-15-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation investments	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. Charles T. Barlow, Sr. P.O. Box 32038 Louisville, KY 40232	Name of Employer Chase Barlow Lumber Co.	Date (month, day, year) 02-10-84	Amount of Each Receipt This Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lumber Co. Executive	Aggregate Year-to-Date-\$ 300.00	
E. Full Name, Mailing Address and ZIP Code Mr. John R. McGinnis P. O. Box 347 Greenup, KY 41144	Name of Employer McBrayer, McGinnis & Leslie	Date (month, day, year) 01-31-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Lendy F. Brown Stonereath Farm P.O. Box 610 Paris, KY 40361	Name of Employer Stonereath Farm	Date (month, day, year) 02-29-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 2000.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Edith Napier 350 Ky Blvd. Hazard, KY 41701	Name of Employer none	Date (month, day, year) 03-30-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 1500.00	
SUBTOTAL of Receipts This Page (optional)			4550.00
TOTAL This Period (last page this line number only)			

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Nonnie J. Chism 510 Altagate Road Louisville, KY 40206	Name of Employer Self	Date (month, day, year) 01-24-84	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Lawrence E. O'Connell 9013 Split Rail Drive Louisville, KY 40214	Name of Employer TFC, Inc.	Date (month, day, year) 02-10-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. David L. Daugherty 1209 Wellington Place, North Louisville, KY 40207	Name of Employer Daugherty & Trautwein, Inc.	Date (month, day, year) 02-13-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professional Engineer	Aggregate Year-to-Date—\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Dr. Clinton R. Potts 7811 Wolf Pen Branch Road Prospect, KY 40059	Name of Employer Self Employed	Date (month, day, year) 03-22-84	Amount of Each Receipt This Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$ 300.00	
E. Full Name, Mailing Address and ZIP Code Mr. Jerry E. Finger Charter Bancshares P. O. Box 10816 Houston, TX 77018	Name of Employer Charter Bank-Houston, TX	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date—\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Thomas R. Sanders Box 401 Murray, KY 42071	Name of Employer self	Date (month, day, year) 03-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Developer	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Judy Hall 618 Hatherleigh Lane Louisville, KY 40222	Name of Employer self	Date (month, day, year) 01-25-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4300.00
TOTAL This Period (last page this line number only)			

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Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. W. Clement Stone 222 W. Adams Chicago, IL 60606	Combined Int. Corp.	03-06-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date—\$	1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Alvin Haynes P. O. Box 1635 Lexington, KY 40592	Alvin Haynes Trucking	03-28-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$	2000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Don Thompson Box 166 Henderson, KY 42420	Thompson, Bitt Service, Inc.	03-26-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$	2000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Hunt Energy	02-22-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date—\$	1000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Martin S. Weinberg 5011 Cliffwood Road Louisville, KY 40222	Greenebaum, Doll & McDonald	03-16-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$	1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. R. Keller Kitchen 2103 Twin Hill Road Louisville, KY 40207	KY Machinery	01-05-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Jane Norton Barrett 8221 Wolf Pen Branch Road Prospect, KY 40059	self	01-25-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife/Mother	Aggregate Year-to-Date—\$	1000.00
SUBTOTAL of Receipts This Page (optional)			6250.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Charles T. Melvin
 555 North Court Street**

Paintsville, KY 41240

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

I.G.A. Store

Date (month,
day, year)

02-22-84

Amount of Each
Receipt this Period

500.00

Occupation
owner

Aggregate Year-to-Date—\$ **500.00**

B. Full Name, Mailing Address and ZIP Code

**Mrs. Lendy F. Brown
 Stonereath Farm
 P.O. Box 610**

Paris, KY 40361

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Stonereath Farm

Date (month,
day, year)

02-29-84

Amount of Each
Receipt This Period

1000.00

Occupation
Owner

Aggregate Year-to-Date—\$ **2000.00**

C. Full Name, Mailing Address and ZIP Code

**Mrs. Edith Napier
 350 Ky Blvd.**

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

03-30-84

Amount of Each
Receipt This Period

500.00

Occupation
retired

Aggregate Year-to-Date—\$ **1500.00**

D. Full Name, Mailing Address and ZIP Code

**Mr. Jess G. Oakley, Jr.
 10302 Foxboro Drive**

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

03-22-84

Amount of Each
Receipt This Period

400.00

Occupation

Housing Consultant

Aggregate Year-to-Date—\$ **400.00**

E. Full Name, Mailing Address and ZIP Code

**Mr. H. Lyle Duerson, Jr.
 400 Pleasantview Avenue**

Louisville, KY 40206

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Southern Optical

Date (month,
day, year)

01-25-84

Amount of Each
Receipt This Period

500.00

Occupation
President/Optician

Aggregate Year-to-Date—\$ **500.00**

F. Full Name, Mailing Address and ZIP Code

**Mrs. Jeannette Priebe
 1001 S. Buckeye Lane**

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson Cnty. Govt.

Date (month,
day, year)

03-20-84

Amount of Each
Receipt This Period

500.00

Occupation
Personnel Director

Aggregate Year-to-Date—\$ **500.00**

G. Full Name, Mailing Address and ZIP Code

**Mr. Michael M. Fleishman
 4107 Woodstone Way**

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Greenebaum, Doll & McDonald

Date (month,
day, year)

03-16-84

Amount of Each
Receipt This Period

500.00

Occupation
Attorney

Aggregate Year-to-Date—\$ **500.00**

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Drura Scott Box 7 Henderson, KY 42420	Name of Employer Scott Lumber Occupation Owner	Date (month, day, year) 03-26-84	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
B. Full Name, Mailing Address and ZIP Code Mr. Orville L. Hamilton Thelma, KY 41260	Name of Employer self Occupation Coal Operator	Date (month, day, year) 02-22-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 500.00		
C. Full Name, Mailing Address and ZIP Code Mrs. W. Clement Stone 222 W. Adams Chicago, IL 60606	Name of Employer self Occupation homemaker	Date (month, day, year) 03-06-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Ms. Louise F. Hickox 6411 Wolf Pen Branch Road Harrods Creek, KY 40027	Name of Employer none Occupation none	Date (month, day, year) 03-30-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
E. Full Name, Mailing Address and ZIP Code Dr. Raymond J. Timmerman 51 Barrett Drive Fort Thomas, KY 41075	Name of Employer Self Employed Occupation Physician	Date (month, day, year) 03-23-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 500.00		
F. Full Name, Mailing Address and ZIP Code Mr. W. Herbert Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Name of Employer Hunt Energy Occupation Executive	Date (month, day, year) 02-22-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
G. Full Name, Mailing Address and ZIP Code Mr. Beverly White P. O. Box 578 Winchester, KY 40391	Name of Employer White, McCann & Stewart Occupation Attorney	Date (month, day, year) 03-16-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 530.00		
SUBTOTAL of Receipts This Page (optional)			5500.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Sallie Ann Koch 3012 Beals Branch Drive Louisville, KY 40206	self	03-28-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Don Mahurin P.O. Box 436 2746 Highway 41 North Henderson, KY 42420	self	03-30-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Aggregate Year-to-Date—\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Donald C. Barton 1014 Circle Drive Corbin, KY 40701	Self	03-19-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date—\$	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Dorothy H. Middleton 163 Arrowhead Road Louisville, KY 40207	self	01-27-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	1000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Owsley Brown, II Poplar Terrace 6501 Longview Lane Louisville, KY 40222	Brown-Forman Distillers Corp.	03-14-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Vice President	Aggregate Year-to-Date—\$	1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Charles D. Clark 307 S. 8th Street Murray, KY 42071	self	03-31-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date—\$	1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Charles A. Osborn, Jr. 1230 Liberty Bank Lane Louisville, KY 40222	Osborn Enterprises	01-18-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Developer	Aggregate Year-to-Date—\$	2000.00
SUBTOTAL of Receipts This Page (optional)			5500.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Jack Dulworth 9143 Briar Forest Houston, TX 77024	Name of Employer Dulworth & Company	Date (month, day, year) 03-05-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Life Insurance Consultant	Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Victor L. Priebe 1001 South Buckeye Lane Prospect, KY 40059	Name of Employer Action Now, Inc.	Date (month, day, year) 03-20-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Mr. Duffy L. Ford 200 South Second Street #167 Richmond, KY 40475	Name of Employer Amick & Helm	Date (month, day, year) 01-23-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C P A	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Phillip D. Scott 763 Lakeshore Drive Lexington, KY 40502	Name of Employer Greenbaum, Dall & McDonald	Date (month, day, year) 03-16-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mrs. A. B. Hancock, Jr. Claiborne House Paris, KY 40361	Name of Employer self	Date (month, day, year) 02-29-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Bonnie N. Sturgeon 902 Rugby Place Louisville, KY 40222	Name of Employer self	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 2000.00	
G. Full Name, Mailing Address and ZIP Code Mr. James D. Hill 832 Kentucky Blvd. Hazard, KY 41701	Name of Employer Perry Oil Co., Inc.	Date (month, day, year) 03-30-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			4750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Dr. Stanley E. Todd, Sr. 304 Barnes Mill Road Richmond, KY 40475	Name of Employer Medical Arts Bldg.	Date (month, day, year) 03-09-84	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation D.M.D.	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mr. Beverly White P. O. Box 578 Winchester, KY 40391	Name of Employer White, McCann & Stewart	Date (month, day, year) 03-26-84	Amount of Each Receipt This Period 30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 530.00	
C. Full Name, Mailing Address and ZIP Code Mr. Jay D. Koontz 3000 West Mt. Zion Road P. O. Box 473 Crestwood, KY 40014	Name of Employer Gene Snyder	Date (month, day, year) 01-31-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Assistant to U.S. Rep.	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Russell Badgett, Jr. Twin Oaks Madisonville, KY 42431	Name of Employer self	Date (month, day, year) 03-08-84	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mining Engineer	Aggregate Year-to-Date-\$ 400.00	
E. Full Name, Mailing Address and ZIP Code Mr. James L. Marvin 13 South Tejon, Suite 202 Colorado Springs, CO 80903	Name of Employer self	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurants & investments	Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Robert J. Begley Hickory Hill Richmond, KY 40475	Name of Employer Begely Drugs	Date (month, day, year) 03-01-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner, Drug Co.	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mr. Gary L. Miller Route 1, Box 221 Flatwoods, KY 41139	Name of Employer Greenup County Bank	Date (month, day, year) 02-01-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			3480.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. I. H. Buchanan, Jr. 151 Parkway Hazard, KY 41701	Name of Employer Hazard Airport	Date (month, day, year) 03-30-84	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Dr. Garry W. Neltner, D.P.M. 3117 Hudnall Avenue Covington, KY 41017	Name of Employer Self	Date (month, day, year) 02-22-84	Amount of Each Receipt This Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date—\$ 1050.00	
C. Full Name, Mailing Address and ZIP Code Dr. Randall Clark 102 S. Maplewood Somerset, KY 42501	Name of Employer Randall Clark, M.D., F.A.C.S.	Date (month, day, year) 02-15-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. Charles A. Osborn, Jr. 1230 Liberty Bank Lane Louisville, KY 40222	Name of Employer Osborn Enterprises	Date (month, day, year) 01-18-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Developer	Aggregate Year-to-Date—\$ 2000.00	
E. Full Name, Mailing Address and ZIP Code Dr. Victor Duvall Anneta Rte. Leitchfield, KY 42754	Name of Employer Clarkson Clinic	Date (month, day, year) 03-06-84	Amount of Each Receipt This Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.	Aggregate Year-to-Date—\$ 300.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Newell D. Fox 8800 Denington Drive Louisville, KY 40222	Name of Employer self	Date (month, day, year) 01-25-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Ronda M. Scott 763 Lakeshore Drive Lexington, KY 40502	Name of Employer self	Date (month, day, year) 03-16-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3650.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Clay Hancock Claiborne Farm Paris, KY 40361	Claiborne Farm	02-03-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date-\$ 2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Bonnie N. Sturgeon 902 Rugby Place Louisville, KY 40222	self	03-31-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 2000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James Martin Hill, Jr. 3244 Huntingdon Houston, TX 77091	Hill & White Apt. Builders	02-22-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Kenneth W. Towery 908 Rugby Place Louisville, KY 40222	Ken Towery Firestone	02-06-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Alpha Hutchinson 235 Knapp Avenue Morehead, KY 40351	Citizens Bank	03-08-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul E. Yarbrough, Jr. 1202 Cantererry Court Arlington, TX 76013	self	03-06-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Nancy B. Kriebel P.O. Box 394 Old Lyme, CT 06371	self	03-06-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investments	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			5250.00
TOTAL This Period (last page this line number only)			

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Russell Badgett, Jr. Twin Oaks Madisonville, KY 42431	self	03-30-84	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mining Engineer	Aggregate Year-to-Date-\$ 400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. E. Truman Mays 801 Leaf Lane Somerset, KY 42501	Self	02-13-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Surgeon	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962	self	03-30-84	900.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lincoln Miller 8520 Preston Highway Louisville, KY 40219	self	01-24-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George A. Bush, Jr. 514 Tiffany Ln. Louisville, KY 40207	Harry K. Moore & Son	02-06-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Garry W. Neltner, D.P.M. 3117 Hudnall Avenue Covington, KY 41017	Self	03-07-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date-\$ 1050.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Nancye M. Combs 701 Waterford Rd. Louisville, KY 40207	Human Resources/Druthers	03-02-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			2650.00
TOTAL This Period (last page this line number only)			

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Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doctor Harold Parham 3946 McGirts Boulevard Jacksonville, FL 32210	Self Employed	01-31-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Victor Duvall Anneta Rte. Leitchfield, KY 42754	Clarkson Clinic	03-12-84	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.	Aggregate Year-to-Date—\$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John H. Rasnick P. O. Box 933 Pikeville, KY 41501	Summitt Engineering	02-27-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Weldon Shouse 2033 Lakeside Drive Lexington, KY 40502	self	03-14-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Clay Hancock Claiborne Farm Paris, KY 40361	Claiborne Farm	02-03-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date—\$ 2000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Andrew H. Susemichel 2420 Frankfort Avenue Louisville, KY 40206	Susemichel Engineering, Inc.	01-19-84	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Henning Hilliard 4506 Upper River Road Louisville, KY 40222	Self Employed	02-22-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Stock Broker	Aggregate Year-to-Date—\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			3750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Kenneth J. Tuggle 3715 Lime Kiln Lane Louisville, KY 40222	Brown, Todd & Heyburn Attorney	02-06-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	500.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Ina Brown Johnson 14 River Hill Road Louisville, KY 40207	Self Homemaker	02-02-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	1000.00	
C. Full Name, Mailing Address and ZIP Code Dr. Byron Young 2040 Von List Way Lexington, KY 40502	Self Employed Physician	02-13-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	500.00	
D. Full Name, Mailing Address and ZIP Code Mr. Robert H. Kriebble P. O. Box 394 Old Lyme, CT 06371	Loctite Corporation Chairman	03-06-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	500.00	
E. Full Name, Mailing Address and ZIP Code Mr. C. L. Baird, Jr. 770 Greenridge Lane Louisville, KY 40207	self attorney	01-18-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	250.00	
F. Full Name, Mailing Address and ZIP Code Mr. Addison M. McConnell, Sr. 12 Sequoyah Dr. Shelbyville, KY 40065	none Retired	01-19-84	800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	800.00	
G. Full Name, Mailing Address and ZIP Code Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962	self Attorney	03-30-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	1000.00	
SUBTOTAL of Receipts This Page (optional)			3650.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Emma R. Butler c/o Butler Construction Co. 2221 Buechel Avenue Louisville, KY 40218	homemaker	03-09-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Garry W. Neltner, D.P.M. 3117 Hudnall Avenue Covington, KY 41017	Self	03-07-84	950.00
Occupation Physician	Aggregate Year-to-Date-\$	1050.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Kimberly G. Cook 708 Culbertson Avenue New Albany, IN 47150	Louisville Auto Auction	01-24-84	1000.00
Occupation businesswoman	Aggregate Year-to-Date-\$	1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. G. N. Parrott 4900 Seneca Dallas, TX 75209	Parrott Oil Company	03-31-84	1000.00
Occupation President	Aggregate Year-to-Date-\$	1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Ernest A. Eggers 3719 Hillsdale Road Louisville, KY 40222	Self	01-27-84	500.00
Occupation Physician	Aggregate Year-to-Date-\$	500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Katie Reece 304 Bridge St. Manchester, KY 40962	self	03-31-84	250.00
Occupation homemaker	Aggregate Year-to-Date-\$	250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lars Frey 5843 Brittany Woods Cr. Louisville, KY 40222	Thomas Industries	02-13-84	500.00
Occupation Executive	Aggregate Year-to-Date-\$	500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			4450.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Arthur K. Smith 1010 Alta Circle Road Louisville, KY 40205	Smith Furniture	03-19-84	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Thomas V. Handy 105 E. 4th Street London, KY 40741	self	03-30-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul Tafel, Jr. 506 Country Lane Louisville, KY 40207	none	02-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Anne Hoke 1114 County Cork Drive Murray, KY 42071	self	02-14-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$	1000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James R. Voyles 2104 Eastern Pkwy. Louisville, KY 40204	Self	01-27-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Charles Jordan, Jr. P.O. Box 187 Vanceburg, KY 41179	First National Bank of Lewis Cty	01-31-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bank President	Aggregate Year-to-Date-\$	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Marvin C. Zeid P. O. Box 52486 Houston, TX 77052	Self	03-05-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Independent Oil Operator	Aggregate Year-to-Date-\$	1000.00
SUBTOTAL of Receipts This Page (optional)			3800.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. R. Bruce LaBoon 3400 Texas Commerce Tower Houston, TX 77002	Name of Employer Liddell, Sapp, Zivley, Brown & LaBoon	Date (month, day, year) 03-31-84	Amount of Each Receipt This Period 1000.00
	Occupation lawyer		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$		1000.00	
B. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
C. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
D. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
E. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
F. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
G. Full Name, Mailing Address and ZIP Code 	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date--\$			
SUBTOTAL of Receipts This Page (optional)			1000.00
TOTAL This Period (last page this line number only)			113692.50

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SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Logan County Republican Party
 811 Crittenden Circle**

Russellville, KY 42276

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-21-84

Amount of Each
 Receipt this Period

253.00

Aggregate Year-to-Date—\$

253.00

B. Full Name, Mailing Address and ZIP Code

**The National Congressional Club
 P. O. Box 18848**

Raleigh, NC 27619

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

473.45

Aggregate Year-to-Date—\$

473.45

C. Full Name, Mailing Address and ZIP Code

**S. W. Republican Women's Club
 10210 Starlight Way**

Louisville, KY 40272

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

02-15-84

Amount of Each
 Receipt This Period

50.00

Aggregate Year-to-Date—\$

50.00

D. Full Name, Mailing Address and ZIP Code

**Lyon Co. Republican Women's Club
 Route 1
 Box 171
 Eddyville, KY 42038**

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-12-84

Amount of Each
 Receipt This Period

50.00

Aggregate Year-to-Date—\$

50.00

E. Full Name, Mailing Address and ZIP Code

**Franklin Co. Rep. Women's Club
 508 Pawnee**

Frankfort, KY 40601

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

02-16-84

Amount of Each
 Receipt This Period

25.00

Aggregate Year-to-Date—\$

25.00

F. Full Name, Mailing Address and ZIP Code

**Monroe Co. Rep. Women's Club
 704 W. 4th Street**

Tompkinsville, KY 42167

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-02-84

Amount of Each
 Receipt This Period

100.00

Aggregate Year-to-Date—\$

100.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

951.45

TOTAL This Period (last page this line number only)

951.45

In-Kind
 Mailing List - Names

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 2 for
 LINE NUMBER 1 (c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Campaign America 919 Prince Street Alexandria, VA 22314		02-13-84	2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	2500.00
B. Full Name, Mailing Address and ZIP Code Campaign For Prosperity 1708 New Hampshire Avenue, N.W. Washington, DC 20009		03-28-84	2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	2500.00
C. Full Name, Mailing Address and ZIP Code Assoc. Builders & Contractors PAC 1806 South Third Street Louisville, KY 40208		03-14-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	500.00
D. Full Name, Mailing Address and ZIP Code Citizens for the Republic 1253 -7th Street Suite 200 Santa Monica, CA 90401		03-26-84	2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	2500.00
E. Full Name, Mailing Address and ZIP Code BI PAR PAC P. O. Box 278 Henderson, KY 42420		03-31-84	1392.70
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	1392.70
F. Full Name, Mailing Address and ZIP Code Nat. Restaurant Assoc. PAC 311 First Street N.W. Washington, DC 20001		03-09-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	500.00
G. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201		02-22-84	3000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	3000.00
SUBTOTAL of Receipts This Page (optional)			12892.70
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 2 for
LINE NUMBER 1(c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Print PAC 1730 North Lynn Street Arlington, VA 22209	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation		
	Aggregate Year-to-Date—\$ 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			500.00
TOTAL This Period (last page this line number only)			13392.70

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SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
416 West Jefferson Street
Louisville, KY 40202

Name of Employer

Date (month,
day, year)

Monthly,
January -
March

Amount of Each
Receipt This Period

3,178

Occupation

Receipt For: ☐ Primary ☐ General
☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 3,178

B. Full Name, Mailing Address and ZIP Code

Bank of Louisville
500 West Broadway
Louisville, KY 40202

Name of Employer

Date (month,
day, year)

Monthly,
January -
March

Amount of Each
Receipt This Period

420

Occupation

Receipt For: ☐ Primary ☐ General
☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

3,598

TOTAL This Period (last page this line number only)

3,598

84020090121

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 16 for
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 (Use separate schedule(s) for each
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 Summary Page)

Line: 17

Page 1 of 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Odell, Roper & Associates, Inc.
7316 Wisconsin Ave.

Purpose of Disbursement

Direct Mail

Date (month,
day, year)

01-09-84

Amount of Each
Disbursement This Period

1500.00

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Bethesda, MD 20814

B. Full Name, Mailing Address and ZIP Code

A.B.C. Printing
3520 College DrivePurpose of Disbursement
PrintingDate (month,
day, year)

03-18-84

Amount of Each
Disbursement This Period

191.63

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40299

C. Full Name, Mailing Address and ZIP Code

Pitney Bowes Credit Corporation
P.O. Box 38460Purpose of Disbursement
Office EquipmentDate (month,
day, year)

03-24-84

Amount of Each
Disbursement This Period

347.97

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40233

D. Full Name, Mailing Address and ZIP Code

Ms. Susan Ballard
3629 Fountain Drive, Apt 3Purpose of Disbursement
SalaryDate (month,
day, year)

02-28-84

Amount of Each
Disbursement This Period

434.15

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40218

E. Full Name, Mailing Address and ZIP Code

Palm Beach Plaza Center Assos.
1941 Bishop Lane, Suite 406Purpose of Disbursement
RentDate (month,
day, year)

01-09-84

Amount of Each
Disbursement This Period

2024.69

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40218

F. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
3201
Leith Lane, Apt 715
Louisville, KY 40218Purpose of Disbursement
SalaryDate (month,
day, year)

01-20-84

Amount of Each
Disbursement This Period

131.55

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Ms. Joan Steurer
4222 Brookhaven Ave.Purpose of Disbursement
SalaryDate (month,
day, year)

01-31-84

Amount of Each
Disbursement This Period

446.24

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40220

H. Full Name, Mailing Address and ZIP Code

Sam Swope Pontiac, Inc.
4311 Shelbyville RoadPurpose of Disbursement
Car RentalDate (month,
day, year)

03-18-84

Amount of Each
Disbursement This Period

350.00

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40207

I. Full Name, Mailing Address and ZIP Code

Internal Revenue Service
Internal Revenue Service CenterPurpose of Disbursement
Payroll TaxesDate (month,
day, year)

02-14-84

Amount of Each
Disbursement This Period

2486.23

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Memphis, TN 37501

SUBTOTAL of Disbursements This Page (optional)

7912.46

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
Line: 17
 Page 2 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-27-84	Amount of Each Disbursement This Period 100.00
B. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-14-84	Amount of Each Disbursement This Period 208.70
C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-19-84	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-04-84	Amount of Each Disbursement This Period 58.33
E. Full Name, Mailing Address and ZIP Code Art Craft Press 480 Fairman Road Lexington, KY 40511	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 171.62
F. Full Name, Mailing Address and ZIP Code Odell, Roper & Associates, Inc. 7316 Wisconsin Ave. Bethesda, MD 20814	Purpose of Disbursement Direct Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 24386.30
G. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Production Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-09-84	Amount of Each Disbursement This Period 19140.86
H. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-13-84	Amount of Each Disbursement This Period 58000.00
I. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-13-84	Amount of Each Disbursement This Period 434.15
SUBTOTAL of Disbursements This Page (optional)			102999.96
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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Page 3 of 16 for
LINE NUMBER 17
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 <u>Louisville, KY 40218</u>	Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	2024.69
B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 <u>Louisville, KY 40218</u>	Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	168.00
C. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 <u>Louisville, KY 40232</u>	Purpose of Disbursement Telephone expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-09-84	517.58
D. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 <u>Louisville, KY 40218</u>	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-18-84	40.79
E. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. <u>Louisville, KY 40220</u>	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	446.24
F. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A <u>Memphis, TN 38194</u>	Purpose of Disbursement Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-09-84	29.25
G. Full Name, Mailing Address and ZIP Code Sam Swope Pontiac, Inc. 4311 Shelbyville Road <u>Louisville, KY 40207</u>	Purpose of Disbursement Car Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-24-84	63.00
H. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center <u>Memphis, TN 37501</u>	Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-12-84	13.84
I. Full Name, Mailing Address and ZIP Code U.S. Postmaster <u>Louisville, KY 40201</u>	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	75.00
SUBTOTAL of Disbursements This Page (optional)			3378.39
TOTAL This Period (last page this line number only)			

84020090024

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-28-84	Amount of Each Disbursement This Period 390.76
B. Full Name, Mailing Address and ZIP Code Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 178.18
C. Full Name, Mailing Address and ZIP Code Madisonville Country Club Earlington Park Madisonville, KY 42431	Purpose of Disbursement Reception Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-13-84	Amount of Each Disbursement This Period 538.59
D. Full Name, Mailing Address and ZIP Code Art Craft Press 480 Fairman Road Lexington, KY 40511	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-24-84	Amount of Each Disbursement This Period 255.15
E. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-09-84	Amount of Each Disbursement This Period 520.85
F. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 5800.00
G. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-20-84	Amount of Each Disbursement This Period 60000.00
H. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-29-84	Amount of Each Disbursement This Period 434.15
I. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Purpose of Disbursement Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-12-84	Amount of Each Disbursement This Period 2024.69
SUBTOTAL of Disbursements This Page (optional)			70142.37
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	345.09
B. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-31-84	26.23
C. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-24-84	221.76
D. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-28-84	446.24
E. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	149.50
F. Full Name, Mailing Address and ZIP Code State Farm Insurance 760 N.W. Broad Street Murfreesboro, TN 37131	Insurance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	298.65
G. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501	Income Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-12-84	2502.00
H. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	100.00
I. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	390.76
SUBTOTAL of Disbursements This Page (optional)			4480.23
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-31-84	1061.69
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Information Systems 9000 Shelbyville Road Louisville, KY 40222	Telephone Expenses XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	443.20
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-08-84	305.76
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-05-84	5800.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-27-84	59520.03
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	534.40
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes P.O. Box 38390 Louisville, KY 40233	Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	358.76
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-19-84	819.20
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P.O. Box 32440 Louisville, KY 40232	Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	307.33
SUBTOTAL of Disbursements This Page (optional)			69150.37
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. <u>Louisville, KY 40220</u>	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-13-84	Amount of Each Disbursement This Period 449.88
B. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A <u>Memphis, TN 38194</u>	Purpose of Disbursement Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-12-84	Amount of Each Disbursement This Period 112.00
C. Full Name, Mailing Address and ZIP Code State Farm Insurance 760 N.W. Broad Street <u>Murfreesboro, TN 37131</u>	Purpose of Disbursement Insurance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-10-84	Amount of Each Disbursement This Period 151.20
D. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center <u>Memphis, TN 37501</u>	Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-13-84	Amount of Each Disbursement This Period 2755.62
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster <u>Louisville, KY 40201</u>	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-09-84	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road <u>Louisville, KY 40205</u>	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-29-84	Amount of Each Disbursement This Period 390.76
G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. <u>Louisville, KY 40204</u>	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-13-84	Amount of Each Disbursement This Period 1061.69
H. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 <u>Louisville, KY 40222</u>	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 168.00
I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. <u>Louisville, KY 40222</u>	Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-21-84	Amount of Each Disbursement This Period 282.77
SUBTOTAL of Disbursements This Page (optional)			5571.92
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-13-84	Amount of Each Disbursement This Period 498.51
B. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 92.17
C. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233	Purpose of Disbursement Office Equipment and Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-24-84	Amount of Each Disbursement This Period 1725.44
D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-28-84	Amount of Each Disbursement This Period 345.09
E. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 2315.31
F. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-29-84	Amount of Each Disbursement This Period 449.88
G. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 1165.00
H. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-09-84	Amount of Each Disbursement This Period 200.00
I. Full Name, Mailing Address and ZIP Code Xerox 1250 Fairwood Ave. Columbus, OH 43267	Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 337.47
SUBTOTAL of Disbursements This Page (optional)			7128.87
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	1061.69
Mr. Richard Nugent 7200 Highway 524 Westport, KY 40077	Photography Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-18-84	397.00
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-09-84	145.35
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-31-84	498.51
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-18-84	858.52
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	345.09
South Central Bell P.O. Box 32440 Louisville, KY 40232	Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-12-84	2045.47
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	581.86
SUBTOTAL of Disbursements This Page (optional)			6826.49
TOTAL This Period (last page this line number only)			

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Mary Jane Geis
 602 Wallace Ave.

Purpose of Disbursement
 Salary

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

01-31-84

Amount of Each
 Disbursement This Period

275.38

Louisville, KY 40207

B. Full Name, Mailing Address and ZIP Code

K. S. Air, Inc.
 4510 Mt. Vernon Road

Purpose of Disbursement
 Airplane Rental

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

03-18-84

Amount of Each
 Disbursement This Period

1587.00

Louisville, KY 40220

C. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement
 Postage

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

02-14-84

Amount of Each
 Disbursement This Period

500.00

Louisville, KY 40201

D. Full Name, Mailing Address and ZIP Code

Ms. Janet Mullins.
 1249 Everett Ave.

Purpose of Disbursement
 Salary

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

02-28-84

Amount of Each
 Disbursement This Period

1061.69

Louisville, KY 40204

E. Full Name, Mailing Address and ZIP Code

AT&T Information Systems
 9300 Shelbyville Road
 Suite 300

Purpose of Disbursement
 Telephone Expenses

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

03-12-84

Amount of Each
 Disbursement This Period

649.13

Louisville, KY 40222

F. Full Name, Mailing Address and ZIP Code

Mr. Bill Oakley
 Apt. 16, Vieux Carre Apts.

Purpose of Disbursement
 Travel Reimbursement

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

03-16-84

Amount of Each
 Disbursement This Period

273.56

Louisville, KY 40222

G. Full Name, Mailing Address and ZIP Code

Mr. Larry Boles
 200 C Street, S.E.
 Room 306

Purpose of Disbursement
 Consulting Services

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

02-15-84

Amount of Each
 Disbursement This Period

500.00

Washington, DC 20003

H. Full Name, Mailing Address and ZIP Code

Ms. Sharon Pierce
 5609 Oxford, Apt 847

Purpose of Disbursement
 Salary

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

02-14-84

Amount of Each
 Disbursement This Period

498.51

Louisville, KY 40291

I. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 3201
 Leith Lane, Apt 715
 Louisville, KY 40218

Purpose of Disbursement
 Travel Reimbursement

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

03-16-84

Amount of Each
 Disbursement This Period

196.20

SUBTOTAL of Disbursements This Page (optional)

5541.47

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	220.30
Ms. Mary Jane Geis 602 Wallace Ave. Louisville, KY 40207	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-13-84	173.82
C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-05-84	400.00
D. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-24-84	643.00
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	500.00
F. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Travel Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-09-84	328.00
G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	1061.69
H. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Furniture Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	285.86
I. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Telephone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-24-84	771.34
SUBTOTAL of Disbursements This Page (optional)			4384.01
TOTAL This Period (last page this line number only)			

SCHEDULE B

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-31-84	434.15
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-28-84	498.51
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-29-84	345.09
Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Telephone Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-02-84	502.11
Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-28-84	275.38
Ms. Mary Jane Geis 602 Wallace Ave. Louisville, KY 40207	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	55.00
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-16-84	400.00
Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601	Clipping Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-04-84	59.47
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-08-84	200.00
SUBTOTAL of Disbursements This Page (optional)			2769.71
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Purpose of Disbursement Airplane Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-04-84	Amount of Each Disbursement This Period 246.00
B. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-24-84	Amount of Each Disbursement This Period 53.76
C. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Purpose of Disbursement Furniture Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 285.86
D. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-04-84	Amount of Each Disbursement This Period 3114.66
E. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 01-13-84	Amount of Each Disbursement This Period 434.15
F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-13-84	Amount of Each Disbursement This Period 502.16
G. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202	Purpose of Disbursement Computer Assistance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-12-84	Amount of Each Disbursement This Period 1937.76
H. Full Name, Mailing Address and ZIP Code Sullivan Screen Print Co., Inc. 3808 Fitzgerald Rd. Louisville, KY 40216	Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 02-19-84	Amount of Each Disbursement This Period 640.82
I. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Purpose of Disbursement Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 03-09-84	Amount of Each Disbursement This Period 538.14
SUBTOTAL of Disbursements This Page (optional)			7753.31
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 14 of 16 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page).

Line: 17

Page 14 of 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222	Salary <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	275.38
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. J. R. Harris Washington, DC 20003	Travel Reimbursement <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-12-84	369.04
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U.S. Postmaster Louisville, KY 40201	Postage <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-16-84	200.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601	Clipping Service <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	143.94
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U.S. Postmaster Louisville, KY 40201	Postage <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	200.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Travel Expenses <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-19-84	328.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-29-84	1061.69
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Furniture Rental <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-13-84	285.86
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-19-84	383.78
SUBTOTAL of Disbursements This Page (optional)			3247.69
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 15 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 17

Page 15 of 16

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes Credit Corporation Office Equipment P.O. Box 38460 Louisville, KY 40233	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-19-84	347.97
B. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02-14-84	434.15
C. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-29-84	502.16
D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-31-84	348.28
E. Full Name, Mailing Address and ZIP Code Com-Bro, Inc. 1939 Goldsmith Lane Louisville, KY 40218	Purpose of Disbursement Computer Programing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-18-84	1440.00
F. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-13-84	446.24
G. Full Name, Mailing Address and ZIP Code Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-29-84	275.38
H. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501	Purpose of Disbursement Income Taxes-General Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-12-84	1109.00
I. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-27-84	200.00
SUBTOTAL of Disbursements This Page (optional)			5103.18
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 16 of 16 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 17

Page 16 of 16

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster	Postage		
Louisville, KY 40201	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-19-84	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Travel Expense		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-24-84	328.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Odell, Roper & Associates, Inc. 7316 Wisconsin Ave. Bethesda, MD 20814	Direct Mail		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01-09-84	43000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	In-Kind Campaign Car		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-31-84	200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243	In-Kind Office Equipment		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-31-84	350.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The National Congressional Club P. O. Box 18848 Raleigh, NC 27619	In-Kind Mailing List - Names		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-31-84	473.45
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. Beverly C. Wheatley 343 Kenwood Hill Rd. Louisville, KY 40214	In-Kind Office Furniture		
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03-31-84	200.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			45551.45
TOTAL This Period (last page this line number only)			351941.88

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 20(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 20(a)

Page 1 of 1

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. H. W. Cates
 7 Arrowhead Road

Louisville, KY 40207

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Refund

Disbursement for: ☒ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

02-04-84

Amount of Each
 Disbursement This Period

200.00

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

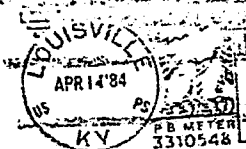
200.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

200.00

84020090130



FIRST CLASS MAIL

**TOUCHE ROSS & CO.
510 WEST BROADWAY
LOUISVILLE, KY. 40202**

TO: *SECRETARY OF THE SENATE*
119 D. STREET, N.E.
WASHINGTON, D.C. 20510

**RETURN RECEIPT
REQUESTED**

CERTIFIED

P 574 047 523

MAIL

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: Postmarked 4/14/84

☒ CERTIFIED 3
☐ REGISTERED _____
☐ FEDERAL EXPRESS _____
☐ EXPRESS MAIL _____

84020090340

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full)		Report Covering the Period:	
McConnell Senate Committee		From: April 1, 1984	To: May 9, 1984
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees		72,868	239,404
(b) Political Party Committees		663	1,614
(c) Other Political Committees		26,427	39,820
(d) The Candidate			
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		99,958	280,838
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			
13. LOANS:			
(a) Made or Guaranteed by the Candidate			
(b) All Other Loans			
(c) TOTAL LOANS (add 13 (a) and 13 (b)).			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		565	577
15. OTHER RECEIPTS (Dividends, Interest, etc.)		2,471	6,069
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)		102,994	287,484
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		120,612	473,950
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			
(b) Of All Other Loans			
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)).			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees			200
(b) Political Party Committees			
(c) Other Political Committees			200
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))			
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)		120,612	474,150
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	221,663	
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$	102,994	
25. SUBTOTAL (Add Line 23 and Line 24)	\$	324,657	
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$	120,612	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	204,045	

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Ailes Communications 456 West 43rd Street New York, NY 10036	40,600		4,426	36,174
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	1,083	4,642	1,502	4,223
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Sprint Accounts Receivable Department Pittsburgh, PA 15254	810		810	
Nature of Debt (Purpose): Long Distance telephone charges				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
South Central Bell P. O. Box 32440 Louisville, KY 40232	903	3,094	2,115	1,882
Nature of Debt (Purpose): Telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	16,198		2,025	14,173
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Datapoint Corporation P. O. Box 84490 Dallas, TX 75284		6,495	3,101	3,394
Nature of Debt (Purpose): Computer equipment				
1) SUBTOTALS This Period This Page (optional)				\$59,846
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207		739	84	655
Nature of Debt (Purpose): Airplane rental				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299	988		270	718
Nature of Debt (Purpose): Office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	2,436		348	2,088
Nature of Debt (Purpose): Office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206		908		908
Nature of Debt (Purpose): Airplane tickets				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				\$4,369
2) TOTAL This Period (last page this line only)				\$64,215
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

940201003

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 14 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Irene M. Vandiviere 8429 Brookhaven Drive Lexington, KY 40502	Name of Employer University of Kentucky Occupation Research Assistant	Date (month, day, year) 04-03-84	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	250.00	
B. Full Name, Mailing Address and ZIP Code Dr. Eli Boggs Hazard, KY 41701	Name of Employer self Occupation Physician	Date (month, day, year) 04-16-84	Amount of Each Receipt This Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	300.00	
C. Full Name, Mailing Address and ZIP Code Mr. Joseph B. Woodlief 331 Zorn Ave., #5 Louisville, KY 40206	Name of Employer Glenmore Distilleries Co. Occupation Executive	Date (month, day, year) 04-13-84	Amount of Each Receipt This Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	300.00	
D. Full Name, Mailing Address and ZIP Code Mr. C. T. Cone 474 W Third St Lexington, KY 40508	Name of Employer Stoll, Keenon & Park Occupation Attorney	Date (month, day, year) 05-03-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Ed M. Farrow P. O. Box 20196 Dallas, TX 75220	Name of Employer Trinity Equipment Occupation businessman	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Name of Employer Hunt Energy Occupation Executive	Date (month, day, year) 05-09-84	Amount of Each Receipt This Period 1000.00 In-Kind Reception #1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	2146.27	
G. Full Name, Mailing Address and ZIP Code Mr. James D. Klingbeil 42 E. Gay Street Columbus, OH 43215	Name of Employer The Klingbeil Mgmt Group, Inc. Occupation President	Date (month, day, year) 04-20-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$	2000.00	
SUBTOTAL of Receipts This Page (optional) :			3450.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 14 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Eddie J. Moore Box 1479 Hyden, KY 41749	Name of Employer self	Date (month, day, year) 04-05-84	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mrs. W. C. Perry 3820 Austin Avenue Waco, TX 76710	Name of Employer self	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mrs. Vicki C. Sistrunk 4018 Deer Lake Cr. Prospect, KY 40059	Name of Employer Jefferson County Gov.	Date (month, day, year) 05-09-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Secretary	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. C. Gordon Wade 2730 Main Chase Ln. Covington, KY 41017	Name of Employer self	Date (month, day, year) 05-01-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation business consultant	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Edna Booth U.S. Highway 42 Box 213 Union, KY 41091	Name of Employer Self employed	Date (month, day, year) 05-01-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Joseph B. Woodlief 331 Zorn Ave., #5 Louisville, KY 40206	Name of Employer Glenmore Distilleries Co.	Date (month, day, year) 05-09-84	Amount of Each Receipt This Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$ 300.00	
G. Full Name, Mailing Address and ZIP Code Mr. Aubrey W. Conway 4 Addison Court Louisville, KY 40216	Name of Employer Bank of St. Helen's	Date (month, day, year) 04-23-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			2850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Ellen Hunt Flowers 3837 Colgate Dallas, TX 75225	self	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harold L. Hall, II 1940 Eaton Avenue Owensboro, KY 42301	self	04-05-84	750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate	Aggregate Year-to-Date-\$ 750.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Hunt Energy	05-09-84	146.27
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$ 2146.27	In-Kind Reception #1
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. William L. Koontz 3014 Juniper Hill Road Louisville, KY 40206	University of Louisville	05-07-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation physician	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. William E. Morris, Jr. 7408 Stonecrest Drive Dallas, TX 75240	Rayman Nasher Company	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James F. Smith 6350 LBJ Freeway Dallas, TX 75240	Texas Oil & Gas Inc.	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Arthur J. Wessely 9109 Clearlake Dallas, TX 75225	self	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1500.00	
SUBTOTAL of Receipts This Page (optional)			3896.27
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Clark W. Breeding P. O. Box 12447 Dallas, TX 75225	Name of Employer self	Date (month, day, year) 04-18-84	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mr. Robert A. Yarber 8300 Douglas, Suite 800 Dallas, TX 75225	Name of Employer Robert A. Yarber Realty Co.	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Dr. Clinton C. Cook, III 1 Arden Road Glenview, KY 40025	Name of Employer Self	Date (month, day, year) 05-01-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. Robert E. Fox 1405 Meganwood Circle Lexington, KY 40502	Name of Employer self	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation builder	Aggregate Year-to-Date—\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Irene S. Hall 820 Rugby Place Louisville, KY 40222	Name of Employer self	Date (month, day, year) 04-23-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Raymond F. Kravis 1804 First National Building Tulsa, OK 74103	Name of Employer self	Date (month, day, year) 05-07-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation oil and gas investments	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Greg C. Mosher 1615 Vance Avenue P. O. Box 2338 Fort Wayne, IN 46801	Name of Employer K & K Insurance Agency, Inc.	Date (month, day, year) 04-20-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4250.00
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Neville Smith 148 Locust Manchester, KY 40962	Name of Employer self employed	Date (month, day, year) 05-04-84	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 400.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Arthur J. Wessely 9109 Clearlake Dallas, TX 75225	Name of Employer self	Date (month, day, year) 05-07-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1500.00	
C. Full Name, Mailing Address and ZIP Code Mr. David C. Brodie P.O. Box 642 Owensboro, KY 42302	Name of Employer none	Date (month, day, year) 04-20-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. John H. Yost 13100 Osage Rd. North Anchorage, KY 40223	Name of Employer Information Requested	Date (month, day, year) 05-08-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. Daniel W. Cook, III 5970 Westgrove Drive Dallas, TX 75270	Name of Employer Goldman Sachs and Company	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Gaston Hallam 4278 Bordeaux Avenue Dallas, TX 75235	Name of Employer Ben E. Keith Company	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Exec. Comm.	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Robert F. Inlow 3517 Centenary Dallas, TX 75225	Name of Employer self	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2900.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Eugene L. Langley 2105 Club Lake Court San Angelo, TX 76904	GTE Telephone Co.	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Donald H. Putnam, Jr. P. O. Box 991 Ashland, KY 41101	Putnam Agency	04-10-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Exec.	Aggregate Year-to-Date—\$	1000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Mary Clay Stites 4326 Glenview Avenue Glenview, KY 40025	self employed	05-09-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Jewelry designer	Aggregate Year-to-Date—\$	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lin E. Barbee 7009 Deloache Dallas, TX 75225	self	04-30-84	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation investments	Aggregate Year-to-Date—\$	300.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Arthur J. Wessely 9109 Clearlake Dallas, TX 75225	self	05-07-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	1500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Donald Bryant, Jr. 100 N. Broadway Suite 1770 Saint Louis, MO 63102	Bryant Planning Group, Inc.	04-30-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date—\$	1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302	Zogg Oil Company	04-23-84	470.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil & Gas Developer	Aggregate Year-to-Date—\$	1030.00
SUBTOTAL of Receipts This Page (optional)			4270.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lionel Hawse 701 Old Dobbin Road Lexington, KY 40502	self	04-23-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Ivan Irwin 4100 Thanksgiving Tower Dallas, TX 75201	Shank, Irwin & Conant	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Mrs. Edith Jones O'Donnell 3366 Interfirst One Dallas, TX 75202	none	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. M. B. Rudman 711 Mercantile Dallas Bldg. Dallas, TX 75201	self	04-18-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil & Gas Producer	Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. C. W. Stoll Mockingbird Valley Road Rock Hill Louisville, KY 40207	none	04-24-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Louis A. Beecherl, Jr. 3801 Beverly Drive Dallas, TX 75205	self	05-07-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Edith Weyland 359 Ridgeway Avenue Louisville, KY 40207	Information Requested	05-09-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bookkeeper	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Frank M. Burke, Jr. 3701 Lexington Dallas, TX 75205	Name of Employer Peat, Harwick Occupation Sr. Partner	Date (month, day, year) 04-18-84	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 300.00		
B. Full Name, Mailing Address and ZIP Code Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302	Name of Employer Zogg Oil Company Occupation Oil & Gas Developer	Date (month, day, year) 04-23-84	Amount of Each Receipt This Period 530.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 1030.00		
C. Full Name, Mailing Address and ZIP Code Mr. A. Myers Davis 395 Redding Rd. #68 Lexington, KY 40502	Name of Employer self Occupation A. Myers Davis Dev. Co., Inc.	Date (month, day, year) 04-24-84	Amount of Each Receipt This Period 750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 750.00		
D. Full Name, Mailing Address and ZIP Code Mrs. A. G. Galt P. O. Box 1709 Dallas, TX 75221	Name of Employer self Occupation Homemaker	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 500.00		
E. Full Name, Mailing Address and ZIP Code Dr. Stephen W. Hiltz Erlanger Med. Plaza #208 3104 Dixie Highway Erlanger, KY 41018	Name of Employer self Occupation Doctor	Date (month, day, year) 04-27-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 500.00		
F. Full Name, Mailing Address and ZIP Code Mr. Peter O'Donnell, Jr. 3366 Interfirst One Dallas, TX 75202	Name of Employer self Occupation Real Estate	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 500.00		
G. Full Name, Mailing Address and ZIP Code Mr. H. G. Schiff Capital Bank Building 5307 E. Mockingbird Ln., Ste 1001 Dallas, TX 75206	Name of Employer self Occupation oil	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 500.00		
SUBTOTAL of Receipts This Page (optional)			3580.00
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Gillis Thomas 8333 Douglas, Suite 1414 Dallas, TX 75225	Name of Employer Gillis Thomas Company	Date (month, day, year) 04-18-84	Amount of Each Receipt this Period 500.00
	Occupation Owner		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		500.00	
B. Full Name, Mailing Address and ZIP Code Mr. John E. Bickel, Jr. 2906 Cheyenne Dr. Owensboro, KY 42301	Name of Employer self	Date (month, day, year) 04-23-84	Amount of Each Receipt This Period 500.00
	Occupation Attorney		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		500.00	
C. Full Name, Mailing Address and ZIP Code Mr. James B. Williams 4425 Belfort Dallas, TX 75205	Name of Employer Ben C. Williams Bakery Service	Date (month, day, year) 04-18-84	Amount of Each Receipt This Period 250.00
	Occupation President		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Russell Harris Davis, Sr. 643 North 29th Street Louisville, KY 40212	Name of Employer Lou. & Jeff. Co. Conv. Bureau	Date (month, day, year) 04-19-84	Amount of Each Receipt This Period 100.00
	Occupation Information Clerk		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		205.00	
E. Full Name, Mailing Address and ZIP Code Mr. Gene P. Gardner 8914 Ayrshire Avenue Louisville, KY 40222	Name of Employer Louisville Cement Co.	Date (month, day, year) 04-17-84	Amount of Each Receipt This Period 500.00
	Occupation Manager		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Robert F. Houlihan 1000 First Security Plaza Lexington, KY 40507	Name of Employer self	Date (month, day, year) 05-03-84	Amount of Each Receipt This Period 500.00
	Occupation attorney		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		500.00	
G. Full Name, Mailing Address and ZIP Code Mr. Conrad L. Keado 11880 Shiloh Road Dallas, TX 75228	Name of Employer Information Requested	Date (month, day, year) 05-08-84	Amount of Each Receipt This Period 500.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date—\$		500.00	
SUBTOTAL of Receipts This Page (optional)			2850.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ellice McDonald, Jr.
 Building C, Suite 300
 3801 Kennett Pike
 Greenville, DE 19807

Name of Employer

none

Date (month,
day, year)

04-20-84

Amount of Each
Receipt this Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation
retired

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. James Park, Jr.
 116 N. Upper

Name of Employer

Brown, Todd & Heyburn

Date (month,
day, year)

04-10-84

Amount of Each
Receipt This Period

1000.00

Lexington, KY 40507

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

attorney

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William L. Schilling
 7 Willow Wood

Name of Employer

Peat, Harwick

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

500.00

Dallas, TX 75205

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Managing Partner

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Louise Thomason
 P. O. Box 425
 305 North Main Street
 Leitchfield, KY 42754

Name of Employer

Farm Bureau Insurance

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Secretary

Aggregate Year-to-Date-\$ 350.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth Q. Bird
 P. O. Box 478
 1630 Dean Avenue
 Owensboro, KY 42302

Name of Employer

self

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Web Carr
 5938 Desco

Name of Employer

self

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

250.00

Dallas, TX 75225

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

businessman

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Ralph Drees
 22A Linden Hill Dr

Name of Employer

self

Date (month,
day, year)

05-01-84

Amount of Each
Receipt This Period

500.00

Crescent Spring, KY 41011

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 11 of 14 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Calvin R. Gearhart
 P. O. Box 1264

Ashland, KY 41105

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

05-09-84

Amount of Each
 Receipt this Period

250.00

Occupation
 attorney

Aggregate Year-to-Date-\$

350.00

B. Full Name, Mailing Address and ZIP Code

Mr. Neil Huffman
 7501 Hunting Creek Drive

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
 day, year)

05-09-84

Amount of Each
 Receipt This Period

100.00

Occupation
 Auto Dealer

Aggregate Year-to-Date-\$

300.00

In-Kind
 Campaign Car

C. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Louisville, KY 40243

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
 day, year)

05-09-84

Amount of Each
 Receipt This Period

175.00

Occupation
 owner

Aggregate Year-to-Date-\$

525.00

In-Kind
 Office Equipment

D. Full Name, Mailing Address and ZIP Code

Mr. Ronald R. Parry
 600 Greenup St.

P. O. Box 472
 Covington, KY 41011

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Robinson, Arnzen, Parry & Wentz

Date (month,
 day, year)

05-08-84

Amount of Each
 Receipt This Period

500.00

Occupation
 Attorney

Aggregate Year-to-Date-\$

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. William B. Schmidt
 720 Sunrise Lane

Elizabethtown, KY 42701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Coco-Cola-Elizabethtown

Date (month,
 day, year)

04-20-84

Amount of Each
 Receipt This Period

1000.00

Occupation
 Business Executive

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. William H. Thomason
 407 Wallace Ave.

P.O. Box 425
 Leitchfield, KY 42754

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

04-20-84

Amount of Each
 Receipt This Period

250.00

Occupation
 Insurance

Aggregate Year-to-Date-\$

350.00

G. Full Name, Mailing Address and ZIP Code

Mr. John E. Bird
 1630 Dean Avenue
 P. O. Box 478
 Owensboro, KY 42302

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

04-20-84

Amount of Each
 Receipt This Period

250.00

Occupation
 Geologist

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
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category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Thomas A. Wood 9108 Nottingham Pkwy. Louisville, KY 40222 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date-\$	Date (month, day, year) 04-26-84 300.00	Amount of Each Receipt This Period 300.00
B. Full Name, Mailing Address and ZIP Code Mrs. Jane Clark 1400 Willow-2101 Louisville, KY 40204 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self employed Occupation homemaker Aggregate Year-to-Date-\$	Date (month, day, year) 05-09-84 500.00	Amount of Each Receipt This Period 500.00
C. Full Name, Mailing Address and ZIP Code Mr. Robert S. Driscoll 63 Wall Street New York, NY 10005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation retired Aggregate Year-to-Date-\$	Date (month, day, year) 05-07-84 1000.00	Amount of Each Receipt This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Mr. Patrick J. F. Gratton 2403 Thomas Dallas, TX 75201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation geologist Aggregate Year-to-Date-\$	Date (month, day, year) 04-18-84 500.00	Amount of Each Receipt This Period 500.00
E. Full Name, Mailing Address and ZIP Code Dr. Walter I. Hume, Jr. 2012 Starmont Road Louisville, KY 40207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation Doctor Aggregate Year-to-Date-\$	Date (month, day, year) 05-08-84 1000.00	Amount of Each Receipt This Period 1000.00
F. Full Name, Mailing Address and ZIP Code Mr. Robert Klabzuba 2104 Texas American Bank Bldg. Fort Worth, TX 76102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation geologist Aggregate Year-to-Date-\$	Date (month, day, year) 04-20-84 1000.00	Amount of Each Receipt This Period 1000.00
G. Full Name, Mailing Address and ZIP Code Mrs. Virginia Mitchell 1520 Castlewood Louisville, KY 40204 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation homemaker Aggregate Year-to-Date-\$	Date (month, day, year) 04-13-84 1000.00	Amount of Each Receipt This Period 1000.00
SUBTOTAL of Receipts This Page (optional)			5300.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Edwin H. Perry 1415 Willow Avenue Louisville, KY 40204	self	05-01-84	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harold Simmons 4835 LBJ Freeway, Suite 600 Dallas, TX 75234	Contman Corporation	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President & Chairman	Aggregate Year-to-Date—\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Faye Thurman 8906 Ayrshire Avenue Louisville, KY 40222	self	04-13-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	2000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962	self	04-19-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$	1100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. William J. Wood 3005 Bryan Station Road Lexington, KY 40511	Self	05-09-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date—\$	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. J. D. Guffey Campbell Centre I, Suite M-2150 Dallas, TX 75206	self	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation oil	Aggregate Year-to-Date—\$	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Caroline Hunt Hunt Energy Corporation 2400 Thanksgiving Tower Dallas, TX 75201	self	05-09-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date—\$	1000.00
SUBTOTAL of Receipts This Page (optional)			3850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. James D. Klingbeil
42 E. Gay Street**

Columbus, OH 43215

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

The Klingbeil Mgmt Group, Inc.

Date (month, day, year)

04-20-84

Amount of Each Receipt this Period

1000.00

Occupation
President

Aggregate Year-to-Date—\$ **2000.00**

B. Full Name, Mailing Address and ZIP Code

**Mr. Thomas W Moller
P. O. Box 2059**

**111 Church Street
Lexington, KY 40594**

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Interest Rate Management, Inc.

Date (month, day, year)

05-07-84

Amount of Each Receipt This Period

1000.00

Occupation
President

Aggregate Year-to-Date—\$ **1000.00**

C. Full Name, Mailing Address and ZIP Code

**Dr. W. C. Perry
3820 Austin Avenue**

Waco, TX 76710

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

04-18-84

Amount of Each Receipt This Period

1000.00

Occupation
Doctor

Aggregate Year-to-Date—\$ **1000.00**

D. Full Name, Mailing Address and ZIP Code

**Mr. James Sistrunk
4018 Deer Lake Cr.**

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month, day, year)

05-09-84

Amount of Each Receipt This Period

250.00

Occupation
Executive

Aggregate Year-to-Date—\$ **250.00**

E. Full Name, Mailing Address and ZIP Code

**Mrs. Faye Thurman
8906 Ayrshire Avenue**

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

04-13-84

Amount of Each Receipt This Period

1000.00

Occupation
homemaker

Aggregate Year-to-Date—\$ **2000.00**

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month, day, year)

Aggregate Year-to-Date—\$

Amount of Each Receipt This Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month, day, year)

Aggregate Year-to-Date—\$

Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

52471.27

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Nat. Republican Senatorial Com.
404 C. Street, N.E.**

Washington, DC 20002

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

05-09-84

562.50

Occupation

In-Kind
Survey

Aggregate Year-to-Date—\$ 562.50

B. Full Name, Mailing Address and ZIP Code

**Women's Republican Club
Hopkins County
Miss Agnes Vickers, Treas.
Earlington, KY 42410**

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-10-84

100.00

Occupation

Aggregate Year-to-Date—\$ 100.00

C. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

662.50

TOTAL This Period (last page this line number only)

662.50

SCHEDULE A

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HOUPAC Mr. Jack M. Webb P. O. Box 27497 Houston, TX 77027		04-18-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ALIGNPAC Mr. Donald L. Bryant, Jr. 4640 S. W. Macadam, Suite 250 Portland, OR 97201		04-30-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	2000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Print PAC Mr. Benjamin Y. Cooper, Treasurer 1730 North Lynn Street Arlington, VA 22209		05-09-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ALIGNPAC Mr. Donald L. Bryant, Jr. 4640 S. W. Macadam, Suite 250 Portland, OR 97201		04-30-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	2000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201		05-09-84	1026.81
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		In-Kind Reception #1
	Aggregate Year-to-Date—\$	4026.81	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Public Service PAC Mr. Roman K. Rice III, Treasurer 8330 Old Courthouse Road, Ste 600 Vienna, VA 22180		04-25-84	5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	5000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Assoc of Amer. Phys & Surg. PAC Mr. Charls Ord 5201-B Lyngate Court Burke, VA 22015		05-09-84	5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	5000.00	
SUBTOTAL of Receipts This Page (optional)			14526.81
TOTAL This Period (last page this line number only)			

SCHEDULE A

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Page 2 of 3 for
LINE NUMBER 11 (C)
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Fund For a Conservative Majority Mr. Robert C. Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	04-19-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		1500.00
B. Full Name, Mailing Address and ZIP Code DALEN PAC Ms. Patricial N. Wilson 5956 Sherry Lane, Suite 910 Dallas, TX 75225	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	05-07-84	5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		5000.00
C. Full Name, Mailing Address and ZIP Code Fund For a Conservative Majority Mr. Robert C. Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	05-09-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		1500.00
D. Full Name, Mailing Address and ZIP Code Lone Star Steel PAC Mr. John M. Morris, Chairman P. O. Box 35888 Dallas, TX 75235	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	04-18-84	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		500.00
E. Full Name, Mailing Address and ZIP Code KY Gasoline Dealers Assn. PAC Mr. James F. Brenzel, President 902 Portland Federal Building Louisville, KY 40202	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	04-19-84	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		100.00
F. Full Name, Mailing Address and ZIP Code MAPCO PAC Mr. Paul E. Thornbrugh, Chairman P. O. Box 645 Tulsa, OK 74101	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	05-02-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		1000.00
G. Full Name, Mailing Address and ZIP Code CLARK PAC Mr. Thomson, President c/o Clark Equip. Co., Circle Dr. Buchanan, MI 49107	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	05-09-84	2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		2500.00
SUBTOTAL of Receipts This Page (optional)			10600.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mercantile National Bank
Mr. James H. Fudge, Treasurer
1704 Main Street
Dallas, TX 75265

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-18-84

500.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Colonial Life & Accident Ins. PAC
Mr. Gayle O. Averyt
1612 Marion Street
Columbia, SC 29201

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-20-84

500.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

ESI-PAC
Mr. T. R. Armstrong, Chairman
P. O. Box 1359
Richardson, TX 75080

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-19-84

300.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$ 300.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

26426.81

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
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 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Name of Employer Occupation	Date (month, day, year) 4-10-84 4-24-84	Amount of Each Receipt this Period \$438 \$127
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Media Time Refund</u>	Aggregate Year-to-Date—\$ <u>565</u>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			\$565
TOTAL This Period (last page this line number only)			\$565

84020110121

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full) <u>McConnell Senate Committee</u>			
A. Full Name, Mailing Address and ZIP Code <u>Liberty National Bank</u> <u>416 West Jefferson Street</u> <u>Louisville, KY 40202</u>	Name of Employer	Date (month, day, year) <u>Monthly,</u> <u>April -</u> <u>May</u>	Amount of Each Receipt this Period <u>\$2,422</u>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u>	Aggregate Year-to-Date—\$ <u>5,600</u>		
B. Full Name, Mailing Address and ZIP Code <u>Bank of Louisville</u> <u>500 West Broadway</u> <u>Louisville, KY 40202</u>	Name of Employer	Date (month, day, year) <u>Monthly,</u> <u>April -</u> <u>May</u>	Amount of Each Receipt This Period <u>\$39</u>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u>	Aggregate Year-to-Date—\$ <u>459</u>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			<u>\$2,461</u>
TOTAL This Period (last page this line number only)			<u>\$2,461</u>

84020117123

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

Page 1 of 8

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Summary Page)

Connell Senate Committee

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
A. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218		Purpose of Disbursement Printing XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-26-84 Amount of Each Disbursement This Period 549.38
B. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202		Purpose of Disbursement Airplane Ticket XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-19-84 Amount of Each Disbursement This Period 328.00
C. Full Name, Mailing Address and ZIP Code Performance Business Forms P.O. Box 100770 Nashville, TN 37210		Purpose of Disbursement Computer Supplies XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-19-84 Amount of Each Disbursement This Period 1047.65
D. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233		Purpose of Disbursement Office Equipment XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-19-84 Amount of Each Disbursement This Period 270.00
E. Full Name, Mailing Address and ZIP Code Treasurer, Ky Unemployment Ins. Fund Frankfort, KY 40621		Purpose of Disbursement Payroll Taxes XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-13-84 Amount of Each Disbursement This Period 761.90
F. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299		Purpose of Disbursement Printing XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-19-84 Amount of Each Disbursement This Period 1501.72
G. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202		Purpose of Disbursement Office Supplies XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-19-84 Amount of Each Disbursement This Period 89.78
H. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking Fund 617 West Jefferson St. Louisville, KY 40202		Purpose of Disbursement Payroll Taxes XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-13-84 Amount of Each Disbursement This Period 547.47
I. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207		Purpose of Disbursement Travel Reimbursement XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 04-10-84 Amount of Each Disbursement This Period 49.05
SUBTOTAL of Disbursements This Page (optional)			5144.95
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233	Office Equipment <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	347.97
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Trips & Tours unlimited, Inc 157 E. Reynolds Rd., Suite A Lexington, KY 40503	Airplane Ticket <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	338.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-08-84	4625.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202	Office Supplies <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	195.72
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Datapoint Corporation P.O. Box 93192 Chicago, IL 60673	Computer Equipment <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	3100.50
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	582.15
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-07-84	36009.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
South Central Bell P.O. Box 32440 Louisville, KY 40232	Telephone <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-14-84	986.55
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U.S. Postmaster Louisville, KY 40201	Postage <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-04-84	300.00
SUBTOTAL of Disbursements This Page (optional)			46485.39
TOTAL This Period (last page this line number only)			

84020110124

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-02-84	6386.60
B. Full Name, Mailing Address and ZIP Code John Conti Company P.O. Box 18289 Louisville, KY 40218	Purpose of Disbursement Office Supplies	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-17-84	47.10
C. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	82.61
D. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	1061.69
E. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-02-84	26852.73
F. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Telephone	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	1128.47
G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-04-84	1000.00
H. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-02-84	4426.07
I. Full Name, Mailing Address and ZIP Code John Conti Company P.O. Box 18289 Louisville, KY 40218	Purpose of Disbursement Office Supplies	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	95.00
SUBTOTAL of Disbursements This Page (optional)			41080.27
TOTAL This Period (last page this line number only)			

84020110125

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	275.38
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-18-84	34.45
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	TV Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-24-84	5714.52
Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Long Distance Calls Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-02-84	809.56
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-17-84	200.00
Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202	Computer Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	248.07
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	1061.69
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Petty Cash Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-04-84	185.61
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	449.88
SUBTOTAL of Disbursements This Page (optional)			8979.16
TOTAL This Period (last page this line number only)			

6
2
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1
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1
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4
8

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage		
U.S. Postmaster	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	500.00
Louisville, KY 40201			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Susan Ballard	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	434.15
3629 Fountain Drive, Apt 3			
Louisville, KY 40218			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Travel Reimbursement		
Mr. Terry Carmack	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-06-84	198.24
3201			
Leith Lane, Apt 715			
Louisville, KY 40218			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Airplane Travel		
K. S. Air, Inc.	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	84.00
4510 Mt. Vernon Road			
Louisville, KY 40220			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Sharon Pierce	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	502.16
5609 Oxford, Apt 847			
Louisville, KY 40291			
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Joan Steurer	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	449.88
4222 Brookhaven Ave.			
Louisville, KY 40220			
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage		
U.S. Postmaster	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	500.00
Louisville, KY 40201			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Susan Ballard	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	434.15
3629 Fountain Drive, Apt 3			
Louisville, KY 40218			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Mr. Terry Carmack	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	363.90
3201			
Leith Lane, Apt 715			
Louisville, KY 40218			
SUBTOTAL of Disbursements This Page (optional)			3466.48
TOTAL This Period (last page this line number only)			

840110127

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kentucky State Treasurer	Payroll Taxes	04-13-84	999.40
Frankfort, KY 40601	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce	Salary	04-30-84	502.16
5609 Oxford, Apt 847	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40291			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea	Reception Reimbursement	04-12-84	676.52
4601 Lincoln Road	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40220			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of Louisville	Payroll Taxes	04-13-84	268.36
500 W. Broadway	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40202			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack	Salary	04-30-84	363.90
3201	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Leith Lane, Apt 715			
Louisville, KY 40218			
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds	Salary	04-13-84	390.76
2326 Broadmeade Road	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40205			
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center	Office Furniture	04-19-84	285.86
P.O. Box 1679	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40201			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Palm Beach Plaza Center Assos.	Rent	04-02-84	2024.69
1941 Bishop Lane, Suite 406	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40218			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Maureen Shea	Salary	04-13-84	220.30
617 Hatherleigh	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Louisville, KY 40222			
SUBTOTAL of Disbursements This Page (optional)			5731.95
TOTAL This Period (last page this line number only)			

84020110128

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
LINE NUMBER ____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 7 of 8

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 W. Broadway Louisville, KY 40202	Purpose of Disbursement Payroll Taxes	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-13-84	2868.29
B. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-30-84	390.76
C. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Travel Reimbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-10-84	221.11
D. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233	Purpose of Disbursement Office Equipment	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04-19-84	227.00
E. Full Name, Mailing Address and ZIP Code Sixth District Republican Comm. 1204 West Main Street Shelbyville, KY 40065	Purpose of Disbursement Research	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-01-84	1500.00
F. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	Purpose of Disbursement In-Kind Campaign Car	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-09-84	100.00
G. Full Name, Mailing Address and ZIP Code Mrs. Caroline Hunt Hunt Energy Corporation 2400 Thanksgiving Tower Dallas, TX 75201	Purpose of Disbursement In-Kind Reception #1	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-09-84	1000.00
H. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Purpose of Disbursement In-Kind Reception #1	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-09-84	1000.00
I. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201	Purpose of Disbursement In-Kind Reception #1	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-09-84	146.27
SUBTOTAL of Disbursements This Page (optional)			7453.43
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page _____ of _____ for
 LINE NUMBER _____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 8 of 8

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
 Hunt Committee for Sound Gov.
 2400 Thanksgiving Tower

Purpose of Disbursement
 In-Kind
 Reception #1

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)
 05-09-84

Amount of Each
 Disbursement This Period
 1026.81

Dallas, TX 75201

B. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Purpose of Disbursement
 In-Kind
 Office Equipment

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)
 05-09-84

Amount of Each
 Disbursement This Period
 175.00

Louisville, KY 40243

C. Full Name, Mailing Address and ZIP Code

Nat. Republican Senatorial Com.
 404 C. Street, N.E.

Purpose of Disbursement
 In-Kind
 Survey

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)
 05-09-84

Amount of Each
 Disbursement This Period
 562.50

Washington, DC 20002

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1764.31

TOTAL This Period (last page this line number only)

120105.94

84020110130

RECEIVED AT THE FEC

Touche Ross & Co.
84 NOV 19 9:48

REC
SECRETARY OF THE SENATE

ISSA NOV 2

November 15, 1984

HAND DEL

Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510

Re: McConnell Senate Committee, FEC Identification No. C00155051
June 30, 1984 Quarterly Report

Gentlemen:

In accordance with the letter which we have received from the Federal Election Commission (a copy of which is attached), please be advised that the \$25,000 loan reflected on the above named report was from personal funds of the candidate, as defined by FEC regulations, as cited in the attached letter.

Please accept this as an amendment to the above described report.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Attachment

cc: Robin Kelly

84020261317



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20541

RECEIVED
CLERK OF THE SENATE
1984 NOV 20 AM 9:18

NOV 6 1984 HAND DELIVERED ☐
RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

84020261318

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Ms. Robin Kelly
Reports Analysis Division
Federal Election Commission
Washington, D.C. 20463

84 NOV 19 4 9:48

RECEIVED
FEC

84020261319

UNITED STATES SENATE

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Form 202-2

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

☐ INSIDE MAIL

Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Nov. 15, 1984

AND OR DATE OF RECEIPT

8402026120

S 3153 2
KY REP C1494

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

(37)

(Summary Page)

ALIGN AREA		ALIGN AREA	
1. Name of Committee (In Full) <u>McConnell Senate Committee</u>		2. FEC Identification Number <u>C00155051</u>	
Address (Number and Street) <u>P. O. Box 1496</u>		3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
City, State and Zip Code <u>Louisville, KY 40201</u>		<input type="checkbox"/> Check if address is different than previously reported	
		RECEIVED CLERK OF THE SENATE JUL 17 AM 11:08 HAND DELIVERED <input type="checkbox"/>	

4. TYPE OF REPORT
- | | |
|---|---|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) |
| <input checked="" type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____ |
| <input type="checkbox"/> January 31 Year End Report | |
| <input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>May 10, 1984</u> through <u>June 30, 1984</u>		
6. Net Contributions (other than loans)			
(a) Total Contributions (other than loans) (From Line 11 (e))		105,215	386,053
(b) Total Contribution Refunds (from Line 20 (d))			200
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))		105,215	385,853
7. Net Operating Expenditures			
(a) Total Operating Expenditures (from Line 17)		112,835	586,785
(b) Total Offsets to Operating Expenditures (from Line 14)			577
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))		112,835	586,208
8. Cash on Hand at Close of Reporting Period (from Line 27)		197,598	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)			
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)		51,768	

Total receipts since inception \$1,038,423

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg
Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

July 13, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

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FEC FORM 3 (3/80)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full)		Report Covering the Period:		
McConnell Senate Committee		From: May 10, 1984	To: June 30, 1984	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
I. RECEIPTS				
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees		77,637	317,041	11 (a)
(Memo Entry Unitemized \$ 22,249)		2,062	3,676	11 (b)
(b) Political Party Committees		25,516	65,336	11 (c)
(c) Other Political Committees				11 (d)
(d) The Candidate		105,215	386,053	11 (e)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11 (a), 11 (b), 11 (c) and 11 (d))				12
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
13. LOANS:		25,000	25,000	13 (a)
(a) Made or Guaranteed by the Candidate				13 (b)
(b) All Other Loans		25,000	25,000	13 (c)
(c) TOTAL LOANS (add 13 (a) and 13 (b))			577	14
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		1,491	7,560	15
15. OTHER RECEIPTS (Dividends, Interest, etc.)				16
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)		131,706	419,190	
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		112,835	586,785	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES				18
19. LOAN REPAYMENTS:		25,000	25,000	19 (a)
(a) Of Loans Made or Guaranteed by the Candidate				19 (b)
(b) Of All Other Loans		25,000	25,000	19 (c)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b))				
20. REFUNDS OF CONTRIBUTIONS TO:			200	20 (a)
(a) Individuals/Persons Other Than Political Committees				20 (b)
(b) Political Party Committees				20 (c)
(c) Other Political Committees			200	20 (d)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))				21
21. OTHER DISBURSEMENTS				
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)		137,835	611,985	22
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$		204,045	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$		131,706	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$		335,751	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$		112,835	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$		197,598	27

84020142272

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 14 for
LINE NUMBER 11(8)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. Charles R. Simpson, III 3604 Basswood Lane Louisville, KY 40207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date—\$	Date (month, day, year) 05-21-84 250.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Mr. Mark Wood Turner 3888 Leestown Road Lexington, KY 40511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Transylvania Univ. Occupation Professor Aggregate Year-to-Date—\$	Date (month, day, year) 06-08-84 1000.00	Amount of Each Receipt This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Mr. Charles J. Wyly, Jr. 800 Campbell Centre 8350 N. Central Expressway Dallas, TX 75206 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self-employed Occupation private investor Aggregate Year-to-Date—\$	Date (month, day, year) 05-14-84 500.00	Amount of Each Receipt This Period 500.00
D. Full Name, Mailing Address and ZIP Code Mr. Ralph A. Homan 104 Elm Street Lawrenceburg, KY 40342 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation retired Aggregate Year-to-Date—\$	Date (month, day, year) 05-15-84 750.00	Amount of Each Receipt This Period 250.00
E. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Auto Dealer Aggregate Year-to-Date—\$	Date (month, day, year) 06-30-84 500.00	Amount of Each Receipt This Period 100.00 In-Kind Campaign Car
F. Full Name, Mailing Address and ZIP Code Mr. Wilbur Kelly P. O. Box 18400 Erlanger, KY 41018 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation Retired Aggregate Year-to-Date—\$	Date (month, day, year) 05-23-84 350.00	Amount of Each Receipt This Period 150.00
G. Full Name, Mailing Address and ZIP Code Mrs. Molly A. Leonard 2915 Portland Avenue Louisville, KY 40212 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Jefferson County Occupation Community Liason Aggregate Year-to-Date—\$	Date (month, day, year) 05-28-84 1025.00	Amount of Each Receipt This Period 175.00
SUBTOTAL of Receipts This Page (optional)			2425.00
TOTAL This Period (last page this line number only)			

84020142273

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 14 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Roger Milliken
 Milliken & Company, Inc.
 P. O. Box 3167
 Spartanburg, SC 29304

Name of Employer

Milliken & Co., Inc.

Date (month,
day, year)

06-18-84

Amount of Each
Receipt this Period

1000.00

Occupation

Chairman/CEO

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Ms. Deborah A. Patterson
 10000 Shelbyville Road
 Suite 100
 Anchorage, KY 40223

Name of Employer

self-employed

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

business woman

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

2000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Clare C. Simpson
 3604 Basswood Lane
 Louisville, KY 40207

Name of Employer

self employed

Date (month,
day, year)

05-21-84

Amount of Each
Receipt This Period

250.00

Occupation

Homemaker

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Patricia Dabney
 399 1/2 Mockingbird Valley Road
 Louisville, KY 40207

Name of Employer

self

Date (month,
day, year)

05-18-84

Amount of Each
Receipt This Period

300.00

Occupation

homemaker

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

Mr. S. Gwathmey Tyler, III
 1500 Walnut Lane
 Louisville, KY 40223

Name of Employer

Reager-Harris Company

Date (month,
day, year)

05-21-84

Amount of Each
Receipt This Period

250.00

Occupation

Insurance Broker

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Ardene Flahavin
 7111 Tophill
 Dallas, TX 75248

Name of Employer

self

Date (month,
day, year)

05-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

housewife

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Ralph A. Homan
 104 Elm Street
 Lawrenceburg, KY 40342

Name of Employer

none

Date (month,
day, year)

06-07-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

750.00

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

84020142274

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 14 for
LINE NUMBER II(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
15025 Bircham Road
Louisville, KY 40243

Name of Employer

Copy Corporation

Date (month,
day, year)
05-29-84

Amount of Each
Receipt This Period
\$175.00

Occupation

Owner

Inkind-Office Equipment

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 875.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Sandra Linker
7229 Heatherly Square
Louisville, KY 40222

Name of Employer

none

Date (month,
day, year)
06-08-84

Amount of Each
Receipt This Period
1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert Moss
Route 2
Columbia, KY 42728

Name of Employer
Self

Date (month,
day, year)
06-04-84

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil Producer

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Deborah A. Patterson
10000 Shelbyville Road
Suite 100
Anchorage, KY 40223

Name of Employer
self-employed

Date (month,
day, year)
05-11-84

Amount of Each
Receipt This Period
\$1000.00

Occupation

businesswoman

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 2000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Paul M. Stafford
499 Church Street
Paintsville, KY 41240

Name of Employer
none

Date (month,
day, year)
05-23-84

Amount of Each
Receipt This Period
\$100.00

Occupation

retired

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard A. Dahlem
604 Briar Hill Road
Louisville, KY 40206

Name of Employer
Dahlem Construction Co.

Date (month,
day, year)
06-06-84

Amount of Each
Receipt This Period
\$250.00

Occupation

Construction

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

\$3025.00

TOTAL This Period (last page this line number only)

84020142275

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. James S. Welch
2001 Rose Island Road

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-01-84

Amount of Each
Receipt this Period

300.00

Occupation

housewife

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Shelly Frank
P. O. Box 32338

Louisville, KY 40232

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Chi-Chi's Restaurants, Inc.

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gordon H. Hood
142 Park Rd.

Ft. Mitchell, KY 41011

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Heckerman & Hood

Date (month,
day, year)

05-30-84

Amount of Each
Receipt This Period

300.00

Occupation

lawyer

Aggregate Year-to-Date-\$

300.00

D. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
15025 Bircham Road

Louisville, KY 40243

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

175.00

Occupation

owner

Aggregate Year-to-Date-\$

875.00

In-Kind
Office Equipment

E. Full Name, Mailing Address and ZIP Code

Mr. Harry Lucas, Jr.
P. O. Box 56467

Houston, TX 77256

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

05-17-84

Amount of Each
Receipt This Period

500.00

Occupation

investments

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Dr. Antoine S. Munther
Dowell Road

Russell Springs, KY 42642

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

05-24-84

Amount of Each
Receipt This Period

200.00

Occupation

Surgeon

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. James A. Patterson, II
10000 Shelbyville Road, Ste 100

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

businessman

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2975.00

TOTAL This Period (last page this line number only)

84020142276

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 14 for
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category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Jack Ragle Graham Grain Company 200 Voorhees Terre Haute, IN 47802		Name of Employer Graham Grain Company	Date (month, day, year) 06-18-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt this Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Russell Badgett, Jr. Twin Oaks Madisonville, KY 42431		Name of Employer self	Date (month, day, year) 05-22-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Mining Engineer	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$ 650.00	
C. Full Name, Mailing Address and ZIP Code Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240		Name of Employer none	Date (month, day, year) 06-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 75.00
		Aggregate Year-to-Date-\$ 225.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Barbara J. Davis 4904 Cooper Chapel Rd. Louisville, KY 40229		Name of Employer self	Date (month, day, year) 05-29-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation photographer	Amount of Each Receipt This Period 150.00
		Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. Richard White P. O. Box 546 Morehead, KY 40351		Name of Employer self-employed	Date (month, day, year) 05-14-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation businesswoman	Amount of Each Receipt This Period 400.00
		Aggregate Year-to-Date-\$ 400.00	
F. Full Name, Mailing Address and ZIP Code Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205		Name of Employer Self	Date (month, day, year) 06-07-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Doctor	Amount of Each Receipt This Period 312.50
		Aggregate Year-to-Date-\$ 625.00	
G. Full Name, Mailing Address and ZIP Code Mr. J. Seaton Huff 5737 South Watterson Trail Louisville, KY 40291		Name of Employer retired	Date (month, day, year) 06-13-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation none	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2687.50
TOTAL This Period (last page this line number only)			

04020142277

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. William Kirkland
 1203 Pradero
 P. O. Box 256
 Frankfort, KY 40601

Name of Employer

Self

Date (month,
day, year)

06-04-84

Amount of Each
Receipt this Period

1000.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date--\$

2000.00

B. Full Name, Mailing Address and ZIP Code

Mr. William F. Lucas
 18 Indian Hills Trail

Name of Employer

none

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

500.00

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date--\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Robert McLean Nash
 Covered Bridge Road

Name of Employer

self

Date (month,
day, year)

05-18-84

Amount of Each
Receipt This Period

500.00

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date--\$

500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Sharon K. Patterson
 10000 Shelbyville Road
 Suite 100

Name of Employer

Jeff. Co. Bd. of Ed.

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

school teacher

Aggregate Year-to-Date--\$

2000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Edith Ray
 Route 3, Box 142

Name of Employer

Self

Date (month,
day, year)

05-22-84

Amount of Each
Receipt This Period

250.00

Vine Grove, KY 40175

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Housewife

Aggregate Year-to-Date--\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard H. Barnett
 249 Royal Palm Way

Name of Employer

Barnett & Alagia

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

1000.00

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date--\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Charles Stuber
 Route 1, Box 144

Name of Employer

Appalachian Computer

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

400.00

London, KY 40741

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Director

Aggregate Year-to-Date--\$

400.00

SUBTOTAL of Receipts This Page (optional)

4650.00

TOTAL This Period (last page this line number only)

84020142278

SCHEDULE A

ITEMIZED RECEIPTS

Page 7 of 14 for
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(Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Mark B. Davis, Jr.
450 Swing Lane**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Occupation

Attorney

Aggregate Year-to-Date—\$ **1000.00**

Date (month,
day, year)

06-28-84

Amount of Each
Receipt This Period

1000.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Kenneth Williams
493 West Street
P. O. Box 807
Paintsville, KY 41240**

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

K-P Enterprises

Occupation

owner

Aggregate Year-to-Date—\$ **275.00**

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Rudy Gernert
1859 Woodfill Way**

Louisville, KY 40205

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date—\$ **500.00**

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

500.00

D. Full Name, Mailing Address and ZIP Code

**Mrs. Mary A. Huff
6003 Glen Hill Road**

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Homemaker

Aggregate Year-to-Date—\$ **1000.00**

Date (month,
day, year)

06-06-84

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

**Ms. Sharon K. Patterson
10000 Shelbyville Road
Suite 100
Anchorage, KY 40223**

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jeff. Co. Bd. of Ed.

Occupation

school teacher

Aggregate Year-to-Date—\$ **2000.00**

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Charles D. Barnett
249 Royal Palm Way**

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Barnett & Alagia

Occupation

Attorney

Aggregate Year-to-Date—\$ **1000.00**

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

1000.00

G. Full Name, Mailing Address and ZIP Code

**Mrs. James H. Taylor
7909 White Cedar Place**

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date—\$ **1000.00**

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

84020142279

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1(a)
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category of the Detailed
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

06-05-84

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 305.00

Date (month,
day, year)

Amount of Each
Receipt this Period

100.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thomas Lyle Williams, III
P. O. Box 1577

Thomasville, GA 31799

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-18-84

Occupation

investments

Aggregate Year-to-Date-\$ 1000.00

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert M. Gintel
Equity Advisors, Inc.
Greenwich Office Park, OP-6
Greenwich, CT 06830

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-18-84

Occupation

investment advisor

Aggregate Year-to-Date-\$ 250.00

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Dow Huffman
211 Sycamore Drive

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

self-employed

Date (month,
day, year)

05-11-84

Occupation

businessman

Aggregate Year-to-Date-\$ 2000.00

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Vernon E. Hux
Tri-Industries, Inc.
951 Sycamore Street
Terre Haute, IN 47807

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Tri-Industries, Inc.

Date (month,
day, year)

06-18-84

Occupation

president

Aggregate Year-to-Date-\$ 1000.00

Amount of Each
Receipt This Period

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. J. Royden Peabody, Jr.
6401 Transylvania Ave.

Harrods Creek, KY 40027

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

06-05-84

Occupation

Volunteer

Aggregate Year-to-Date-\$ 500.00

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. John W. Rollins
P. O. Box 1026

Wilmington, DE 19899

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

RLC Corporation

Date (month,
day, year)

06-30-84

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$ 1000.00

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

84020142280

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Margerite C. Bickel
4010 Lime Kiln Lane

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self employed

Occupation

Homemaker

Aggregate Year-to-Date--\$

Date (month,
day, year)

05-14-84

Amount of Each
Receipt this Period

500.00

B. Full Name, Mailing Address and ZIP Code

Mr. James H. Taylor
7909 White Cedar Place

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lichtefeld-Mazzaro

Occupation

superintendent

Aggregate Year-to-Date--\$

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Dr. Robert E. Windom
1562 South Drive

Sarasota, FL 33579

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation

doctor

Aggregate Year-to-Date--\$

Date (month,
day, year)

05-25-84

Amount of Each
Receipt This Period

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Sloane Graff, Jr.
3900 Barbour Ln.
Box 22311

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date--\$

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

200.00

E. Full Name, Mailing Address and ZIP Code

Mr. Dow Huffman
211 Sycamore Drive

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self-employed

Occupation

businessman

Aggregate Year-to-Date--\$

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

F. Full Name, Mailing Address and ZIP Code

Miss Kate Ireland

Wendover, KY 41775

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Frontier Nursing Service

Occupation

Director

Aggregate Year-to-Date--\$

Date (month,
day, year)

06-20-84

Amount of Each
Receipt This Period

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Edward N. McDevitt
105 Chipping Way

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jeff. Co. Works.

Occupation

Fleet Coordinator

Aggregate Year-to-Date--\$

Date (month,
day, year)

05-17-84

Amount of Each
Receipt This Period

50.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

84020142281

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Frederick G. Neikirk
104 College Street

Somerset, KY 42501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

05-21-84

Amount of Each
Receipt this Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Oscar Penn

Route 6

Newton Pike

Lexington, KY 40511

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Penn Bros. Tobacco

Date (month,
day, year)

Whs.
05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

Owner

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Dr. C. William Briscoe

Rt 2, Box 307-C Fern Hill

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

50.00

Occupation

M.D.

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. David F. Dorn

Forest Oil Company

950 17th Street, Suite 1500

Denver, CO 80202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Forest Oil Company

Date (month,
day, year)

06-18-84

Amount of Each
Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Dalton J. Woods

505 American Towers

Shreveport, LA 71101

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

05-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

Ind. Gas & Oil Producer

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Kip Huffman

8000 Weyanoke Court

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

car dealership

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

general manager

Aggregate Year-to-Date-\$

2000.00

G. Full Name, Mailing Address and ZIP Code

Mr. David A. Jones

P.O. Box 1438

Louisville, KY 40201

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Humana

Date (month,
day, year)

05-22-84

Amount of Each
Receipt This Period

1000.00

Occupation

Executive

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

84020142282

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Gene LaCroix 1700 Park Shore Road La Grange, KY 40031	Name of Employer self	Date (month, day, year) 06-04-84	Amount of Each Receipt this Period 1000.00
	Occupation Arabian Horse Breeder & Trainer	Aggregate Year-to-Date-\$ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Mr. Edward N. McDevitt 105 Chipping Way Louisville, KY 40222	Name of Employer Jeff. Co. Works.	Date (month, day, year) 05-18-84	Amount of Each Receipt This Period 300.00
	Occupation Fleet Coordinator	Aggregate Year-to-Date-\$ 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Dr. David S. Nightingale 401 Jarvis Lane Louisville, KY 40207	Name of Employer Self Employed	Date (month, day, year) 06-30-84	Amount of Each Receipt This Period 1000.00
	Occupation Doctor	Aggregate Year-to-Date-\$ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Mr. George Peterkin, Jr. Kirby Exploration Company P. O. Box 1745 Houston, TX 77251	Name of Employer Kirby Exploration Company	Date (month, day, year) 06-18-84	Amount of Each Receipt This Period 1000.00
	Occupation president	Aggregate Year-to-Date-\$ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mr. Elizabeth Hoerth Sego Wilwood Antiques P. O. Box 13 Fisherville, KY 40023	Name of Employer Wilwood Antiques	Date (month, day, year) 05-11-84	Amount of Each Receipt This Period 400.00
	Occupation Owner	Aggregate Year-to-Date-\$ 400.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Mr. Curtis E. Calder, Jr. POB 1020 Dallas, TX 75221	Name of Employer Self employed	Date (month, day, year) 06-15-84	Amount of Each Receipt This Period 250.00
	Occupation Oil and Gas Producer	Aggregate Year-to-Date-\$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Ms. Charlotte A. Elam 10604 Sycamore Court Anchorage, KY 40223	Name of Employer PATCO	Date (month, day, year) 05-11-84	Amount of Each Receipt This Period 1000.00
	Occupation secretary	Aggregate Year-to-Date-\$ 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			4950.00
TOTAL This Period (last page this line number only)			

04020142203

SCHEDULE A

ITEMIZED RECEIPTS

Page 12 of 14 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Bertha Wright Wright Ent. 301 E. Main Lexington, KY 40507	Name of Employer Calumet Farm	Date (month, day, year) 05-24-84	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Horse Industry	Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Kip Huffman 8000 Weyanoke Court Prospect, KY 40059	Name of Employer car dealership	Date (month, day, year) 05-11-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation general manager	Aggregate Year-to-Date—\$ 2000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Albert S. Kellow 1603 Avenue Plaza Louisville, KY 40203	Name of Employer none	Date (month, day, year) 05-22-84	Amount of Each Receipt This Period 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 350.00	
D. Full Name, Mailing Address and ZIP Code Dr. Ralph Landau Listowel, Inc. Two Park Avenue, Suite 1525 New York, NY 10016	Name of Employer Listowle, Inc.	Date (month, day, year) 06-18-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chemical Engineer	Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Edward N. McDevitt 105 Chipping Way Louisville, KY 40222	Name of Employer Jeff. Co. Works.	Date (month, day, year) 05-18-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Fleet Coordinator	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Beatrice Carr Pickens P. O. Box 2009 Amarillo, TX 79189	Name of Employer self	Date (month, day, year) 06-30-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Catherine M. Shallcross 1816 Bainbridge Row Drive Louisville, KY 40222	Name of Employer self	Date (month, day, year) 05-24-84	Amount of Each Receipt This Period 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			4350.00
TOTAL This Period (last page this line number only)			

84020142284

SCHEDULE A

ITEMIZED RECEIPTS

Page 13 of 14 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Edward L. Callahan
 2003 Rio Vista

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

Pathologist

Aggregate Year-to-Date—\$

Date (month,
day, year)

06-22-84

Amount of Each
Receipt this Period

200.00

B. Full Name, Mailing Address and ZIP Code

Mr. Matthew Toebben
 2536 Hazelwood Dr.

Crescent Spring, KY 41017

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self employed

Occupation

Builder

Aggregate Year-to-Date—\$

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

400.00

C. Full Name, Mailing Address and ZIP Code

Mr. F. Evans Farwell
 5824 St. Charles Avenue

New Orleans, LA 70115

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

executive

Occupation

retired

Aggregate Year-to-Date—\$

Date (month,
day, year)

05-21-84

Amount of Each
Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. George L. Wright
 Route 7, Box 653

Russell Springs, KY 42642

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

Retired

Aggregate Year-to-Date—\$

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

100.00

E. Full Name, Mailing Address and ZIP Code

Mr. Neil Huffman
 7501 Hunting Creek Drive

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self Employed

Occupation

Auto Dealer

Aggregate Year-to-Date—\$

Date (month,
day, year)

05-29-84

Amount of Each
Receipt This Period

100.00

In-Kind
Campaign Car

F. Full Name, Mailing Address and ZIP Code

Mr. Albert S. Kellow
 1603 Avenue Plaza

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date—\$

Date (month,
day, year)

06-22-84

Amount of Each
Receipt This Period

100.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Molly A. Leonard
 2915 Portland Avenue

Louisville, KY 40212

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Jefferson County

Occupation

Community Liason

Aggregate Year-to-Date—\$

Date (month,
day, year)

05-23-84

Amount of Each
Receipt This Period

825.00

SUBTOTAL of Receipts This Page (optional)

2725.00

TOTAL This Period (last page this line number only)

8:4020142285

SCHEDULE A

ITEMIZED RECEIPTS

Page 14 of 14 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jon T. Miho 190 S. King Street, #1500 Honolulu, HI 96813	Fong & Miho	05-25-84	150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>attorney</u> Aggregate Year-to-Date—\$ <u>250.00</u>		
B. Full Name, Mailing Address and ZIP Code Mr. Richard R. Ohrstrom P. O. Box 325 Middleburg, VA 22117	Name of Employer not provided	Date (month, day, year) 05-25-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>investment</u> Aggregate Year-to-Date—\$ <u>1000.00</u>		
C. Full Name, Mailing Address and ZIP Code Mr. T. Boone Pickens, Jr. P. O. Box 2009 Amarillo, TX 79189	Name of Employer Mesa Petroleum Co.	Date (month, day, year) 06-30-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>President</u> Aggregate Year-to-Date—\$ <u>1000.00</u>		
D. Full Name, Mailing Address and ZIP Code Mr. Alfred R. Shands, III 8909 Highway 329 Crestwood, KY 40014	Name of Employer Information Requested	Date (month, day, year) 06-15-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Information Requested</u> Aggregate Year-to-Date—\$ <u>1000.00</u>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			3150.00
TOTAL This Period (last page this line number only)			\$55,387.50

84020142286

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 11(b)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06-11-84	1395.58
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		In-Kind Reception #2
	Aggregate Year-to-Date—\$	2105.64	
B. Full Name, Mailing Address and ZIP Code Republican Party of Woodford Co. Ms. Elizabeth Short, Treasurer Route 1, Hedden Road Versailles, KY 40383	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		06-27-84	126.50
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	126.50	
C. Full Name, Mailing Address and ZIP Code Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		05-31-84	147.56
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		In-Kind Meals of any kind
	Aggregate Year-to-Date—\$	2105.64	
D. Full Name, Mailing Address and ZIP Code Grayson County Republican Women Mrs. Jo Ann Cottrell, Treasurer Leitchfield, KY 42754	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		06-22-84	367.50
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	367.50	
E. Full Name, Mailing Address and ZIP Code Harrison Co. Rep. Women's Club Mrs. Roberta N. Miner, Treasurer 220 Oddville Avenue Cynthiana, KY 41031	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		05-23-84	25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	25.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			2062.14
TOTAL This Period (last page this line number only)			2062.14

84020142287

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ITEMIZED RECEIPTS

Page 2 of 3 for
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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hunt Committee for Sound Gov. 2400 Thanksgiving Tower		06-09-84	445.20
Dallas, TX 75201	Occupation		In-Kind Reception #1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		4492.77
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hunt Oil Company PAC Mr. George McVay, Chairman 2900 Interfirst One Building Dallas, TX 75202		06-21-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232		05-11-84	1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		3500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Maytag Good Government Committee Mr. Donald C. Byers, Chairman The Maytag Company Newton, IA 50208		05-30-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232		06-06-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		3500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Diamond Shamrock Vol. Pol. Cont. Mr. Robert E. Garbesi 717 N. Harwood Dallas, TX 75201		06-21-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232		06-20-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		3500.00
SUBTOTAL of Receipts This Page (optional)			5945.20
TOTAL This Period (last page this line number only)			

84020143288

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Cooper Industries PAC Mr. Alan J. Hill P. O. Box 4446 Houston, TX 77210		Name of Employer Occupation	Date (month, day, year) 06-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt this Period 2500.00	
B. Full Name, Mailing Address and ZIP Code First KY National Corp. PAC Mr. Steve Miles P. O. Box 1019 Louisville, KY 40201		Name of Employer Occupation	Date (month, day, year) 05-11-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 1000.00	
C. Full Name, Mailing Address and ZIP Code Prudential PAC Prudential Plaza Newark, NJ 07101		Name of Employer Occupation	Date (month, day, year) 05-21-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 1000.00	
D. Full Name, Mailing Address and ZIP Code Allis-Chalmers Voluntary PCF Mr. R. A. Edwards, Jr., V. P. P. O. Box 512 Milwaukee, WI 53201		Name of Employer Occupation	Date (month, day, year) 06-14-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 500.00	
E. Full Name, Mailing Address and ZIP Code R.P.A.C. Mr. Jack Carlson 430 North Michigan Avenue Chicago, IL 60611		Name of Employer Occupation	Date (month, day, year) 05-21-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 3000.00	
F. Full Name, Mailing Address and ZIP Code BUILD PAC Mr. Allen Valentine, Treasurer P. O. Box 50801 Dallas, TX 75250		Name of Employer Occupation	Date (month, day, year) 05-30-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 500.00	
G. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201		Name of Employer Occupation	Date (month, day, year) 05-16-84
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 20.76	
		In-Kind Postage	
		Aggregate Year-to-Date-\$ 4492.77	
SUBTOTAL of Receipts This Page (optional)			8520.76
TOTAL This Period (last page this line number only)			

04020142289

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

SUN PAC
 Mr. David W. Twomey, Adm. Dir.
 100 Matsonford Road
 Radnor, PA 19087

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

06-11-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Tenneco Employees Good Govt.Fund
 Mr. J. S. Brogdon, Jr.
 P. O. Box 2511
 Houston, TX 77001

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

05-29-84

1000.00

Occupation

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

The Republican Majority Fund
 Senator Howard H. Baker, Jr.
 227 MA Avenue, N.E. #220
 Washington, DC 20002

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

06-25-84

5000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 5000.00

D. Full Name, Mailing Address and ZIP Code

HOUPAC
 Mr. Jack M. Webb
 P. O. Box 27497
 Houston, TX 77027

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

06-15-84

4000.00

Occupation

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 5000.00

E. Full Name, Mailing Address and ZIP Code

Non Partisan Political Sup.Com.
 Mr. Joseph H. Kehlbeck, Manager
 MA Material Resource Operation
 GE AppParkLouisville, KY 40225

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

05-14-84

50.00

Occupation

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 50.00

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

11050.00

TOTAL This Period (last page this line number only)

25515.96

84020142290

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 13 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Judge A. Mitchell McConnell, Jr.
 3 Gardiner Court

Louisville, KY 40205

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

05-14-84

Amount of Each
Receipt this Period

25000.00

Occupation

Aggregate Year-to-Date—\$ 25000.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

25000.00

8400142291

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) <u>McConnell Senate Committee</u>			
A. Full Name, Mailing Address and ZIP Code Liberty National Bank 416 West Jefferson Street Louisville, KY 40202	Name of Employer	Date (month, day, year) Monthly May & June	Amount of Each Receipt this Period \$1,459
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u>	Aggregate Year-to-Date—\$ <u>7,059</u>		
B. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 West Broadway Louisville, KY 40202	Name of Employer	Date (month, day, year) Monthly May & June	Amount of Each Receipt This Period 32
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on Investment</u>	Aggregate Year-to-Date—\$ <u>491</u>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional)			\$1,491
TOTAL This Period (last page this line number only)			\$1,491

84020142292

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 1 of 11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of Louisville 500 W. Broadway Louisville, KY 40202	Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-15-84	3119.79
Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-20-84	12.50
K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	1187.75
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	788.98
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	320.28
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-15-84	502.16
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-23-84	985.04
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-15-84	1179.89
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	100.00
SUBTOTAL of Disbursements This Page (optional)			8196.39
TOTAL This Period (last page this line number only)			

84020142293

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

LINE NUMBER 17
(Use separate schedule(s) for each
Page 2 of 2 category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in full) McCommer Senate Committee			
A. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-23-84	Amount of Each Disbursement This Period 378.00
B. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, 433 East Market Street Louisville, KY 40202	Purpose of Disbursement InOffice Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-19-84	Amount of Each Disbursement This Period 84.00
C. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Purpose of Disbursement Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-22-84	Amount of Each Disbursement This Period 24.00
D. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-29-84	Amount of Each Disbursement This Period 195.38
E. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-15-84	Amount of Each Disbursement This Period 759.08
F. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-16-84	Amount of Each Disbursement This Period 296.45
G. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 502.16
H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-23-84	Amount of Each Disbursement This Period 791.70
I. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 6-29-84	Amount of Each Disbursement This Period \$1142.43
SUBTOTAL of Disbursements This Page (optional)			4173.20
TOTAL This Period (Use page this line number only)			

84020142294

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER 17
 (Use separate schedule(s) for each
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Line: 17

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Name of Committee (in Full):
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	300.00
B. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-14-84	1965.60
C. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202	Computer Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-22-84	322.37
D. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-22-84	24.00
E. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-15-84	390.76
F. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	788.98
G. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-22-84	294.00
H. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-15-84	2024.69
I. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32240 Louisville, KY 40232	phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	834.60
SUBTOTAL of Disbursements This Page (optional)			6945.00
TOTAL This Period (Use only one line number only)			

84020142295

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 11 for
LINE NUMBER 17
(Use separate schedule(s) for each
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Summary Page)

McConnell Senate Committee

Line: 17

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full):			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	1121.72
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-11-84	2000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	735.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	194.18
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-07-84	256.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	390.76
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-15-84	1061.69
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	127.05
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-23-84	2024.69
SUBTOTAL of Disbursements This Page (optional)			7911.09
TOTAL This Period (last page this line number only)			

84020142296

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER 17
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Name of Committee (in Full):

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones	06-22-84	109.05
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Travel Reimbursement	06-21-84	128.80
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U.S. Postmaster Louisville, KY 40201	Postage	05-17-84	200.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media	06-15-84	5800.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	S ary	05-15-84	363.90
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Salary	06-29-84	275.38
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Expense Reimbursement	05-29-84	21.44
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary	06-29-84	1061.69
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Performance Business Forms P.O. Box 100770 Nashville, TN 37210	Office Supplies	06-22-84	2.10

SUBTOTAL of Disbursements This Page (optional)

7962.36

TOTAL This Period (last page this line number only)

84020142297

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full): McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233	Purpose of Disbursement Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-19-84	Amount of Each Disbursement This Period 270.00
B. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Purpose of Disbursement Long Distance Calls Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-23-84	Amount of Each Disbursement This Period 765.49
C. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-29-84	Amount of Each Disbursement This Period 184.53
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-18-84	Amount of Each Disbursement This Period 30.50
E. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-15-84	Amount of Each Disbursement This Period 1373.93
F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Purpose of Disbursement Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-15-84	Amount of Each Disbursement This Period 84.11
G. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-15-84	Amount of Each Disbursement This Period 275.38
H. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-15-84	Amount of Each Disbursement This Period 1061.69
I. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233	Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-22-84	Amount of Each Disbursement This Period 347.97
SUBTOTAL of Disbursements This Page (optional)			4393.60
TOTAL This Period (last page this line number only)			

84020142298

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 15
 (Use separate schedule(s) for each
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Name of Committee (in Full): McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Quality Inn-Riverview Covington, KY 41000	Purpose of Disbursement Room Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-11-84	Amount of Each Disbursement This Period 75.00
B. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Purpose of Disbursement Long Distance Calls Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-19-84	Amount of Each Disbursement This Period 863.93
C. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 415.47
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-27-84	Amount of Each Disbursement This Period 174.72
E. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-23-84	Amount of Each Disbursement This Period 5800.00
F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-17-84	Amount of Each Disbursement This Period 100.27
G. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 275.38
H. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 4275.24
I. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 1061.69
SUBTOTAL of Disbursements This Page (optional)			13041.70
TOTAL This Period (last page this line number only)			

84020142299

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 8 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 8 of 11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full):
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-14-84	48343.71
Quality Inn-Riverview Covington, KY 41000	Room Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-30-84	75.00
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-15-84	449.88
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-06-84	500.00
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	217.08
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	363.90
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-15-84	502.16
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-29-84	449.88
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-06-84	500.00
SUBTOTAL of Disbursements This Page (optional)			51401.61
TOTAL This Period (last page-this line number only)			

84020142300

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 9 of 11 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

Page 9 of 11

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-15-84	434.15
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-18-84	93.69
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-22-84	1178.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Airplane Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-22-84	328.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Furniture Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	285.86
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-21-84	175.50
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-15-84	449.88
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	P. O. Box Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06-19-84	26.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05-29-84	434.15
SUBTOTAL of Disbursements This Page (optional)			3405.23
TOTAL This Period (last page this line number only)			

84020142301

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 10 of 11 for
LINE NUMBER 15
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

Page 10 of 11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-17-84	Amount of Each Disbursement This Period 655.00
B. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-15-84	Amount of Each Disbursement This Period 788.98
C. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-18-84	Amount of Each Disbursement This Period 169.40
D. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-29-84	Amount of Each Disbursement This Period 502.16
E. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-23-84	Amount of Each Disbursement This Period 105.16
F. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 449.88
G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-27-84	Amount of Each Disbursement This Period 174.72
H. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	Purpose of Disbursement In-Kind Campaign Car Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05-29-84	Amount of Each Disbursement This Period 100.00
I. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	Purpose of Disbursement In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06-30-84	Amount of Each Disbursement This Period 100.00
SUBTOTAL of Disbursements This Page (optional)			3045.30
TOTAL This Period (last page this line number only)			

84020142302

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 19 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Judge A. Mitchell McConnell, Jr. 3 Gardiner Court Louisville, KY 40205	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Loan Repayment</u>	Date (month, day, year) 06-04-84	Amount of Each Disbursement This Period \$25,000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			25,000
TOTAL This Period (last page this line number only)			\$25,000

84020142304

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<u>McConnell Senate Committee</u>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 West 43rd Street New York, NY 10036	36,174		12,974	23,200
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	4,223	735	2,701	2,257
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sprint Accounts Receivable Department Pittsburgh, PA 15254		2,386	1,629	757
Nature of Debt (Purpose): Long Distance Telephone Charges				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232	1,882	2,314	2,826	1,370
Nature of Debt (Purpose): telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	14,173		4,050	10,123
Nature of Debt (Purpose): office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Datapoint Corporation P. J. Box 84490 Dallas, TX 75284	3,394	2,414		5,808
Nature of Debt (Purpose): computer equipment				
1) SUBTOTALS This Period This Page (optional)				43,515
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

84020142305

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor:				
K. S. Air, Inc. P. O. Box 7183 Louisville, KY 40207	655	3,295	3,021	929
Nature of Debt (Purpose): Airplane rental				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Pitney Bowes 1901 Embassy Square Louisville, KY 40299	718		270	448
Nature of Debt (Purpose): office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Pitney Bowes Credit Corporation P. O. Box 38460 Louisville, KY 40233	2,088		348	1,740
Nature of Debt (Purpose): office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206	908		908 (to page 3)	
Nature of Debt (Purpose): Airplane Tickets				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
AT & T Information Systems 9300 Shelbyville Road, Suite 300 Louisville, KY 40222		1,121	378	743
Nature of Debt (Purpose): phones				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299		634		634
Nature of Debt (Purpose): studio taping				
1) SUBTOTALS This Period This Page (optional)				4,494
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

84020142306

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

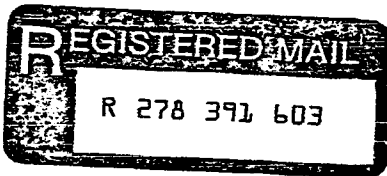
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Copy Corporation 10420 Bluegrass Parkway Jeffersontown, KY 40299		842		842
Nature of Debt (Purpose): office supplies				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202		908 (from page 2)		-908
Nature of Debt (Purpose): Airplane tickets				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sullivan Screen Print Company 3808 Fitzgerald Road Louisville, KY 40216		2,009		2,009
Nature of Debt (Purpose): Bumper stickers				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				3,750
2) TOTAL This Period (last page this line only)				51,768
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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84020142308

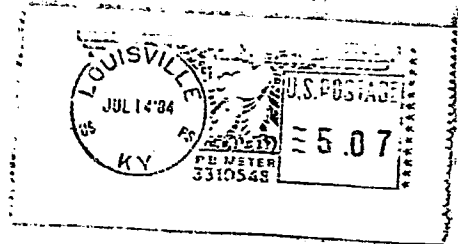
RETURN RECEIPT
REQUESTED



Secretary of Senate

119 D Street, N.E.

Washington, DC 20510



Registered Mail
Return receipt requested

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: _____

☐ CERTIFIED _____

☒ REGISTERED _____

7-14-84

☐ FEDERAL EXPRESS _____

☐ EXPRESS MAIL _____

84020142309



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20541

NOV 6 1984 20-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

94033102287

Touche Ross & Co.

RECEIVED
OFFICE OF THE SENATE

NOV 21 PM 2 44

November 15, 1984

HAND DELIVERED

Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510

Re: McConnell Senate Committee, FEC Identification No. C00155051
June 30, 1984 Quarterly Report

Gentlemen:

In accordance with the letter which we have received from the Federal Election Commission (a copy of which is attached), please be advised that the \$25,000 loan reflected on the above named report was from personal funds of the candidate, as defined by FEC regulations, as cited in the attached letter.

Please accept this as an amendment to the above described report.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Attachment

cc: Robin Kelly



FEDERAL ELECTION COMMISSION
WASHINGTON DC 20463

NOV 6 1984 RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

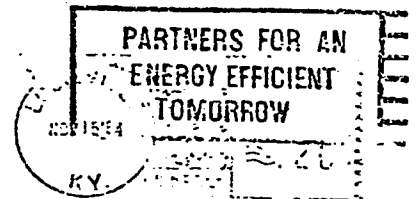
Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

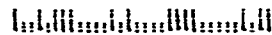
8402026178

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510



8402026137

UNITED STATES SENATE

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

PHONE 202-22

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED _____
Date of Receipt

☐ INSIDE MAIL _____
Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____
Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED _____

☐ REGISTERED/CERTIFIED MAIL POSTMARK _____

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER _____ POSTMARK Nov. 15, 1984

AND OR DATE OF RECEIPT _____

94020261380

(Summary Page)

4. TYPE OF REPORT

- This report contains activity for - ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

Total Receipts Since Inception - \$1,321,629

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3 (3/80)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (In Full)		Report Covering the Period:		
McConnell Senate Committee		From: July 1, 1984	To: September 30, 1984	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
I. RECEIPTS				
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees		247,727	564,768	11 (a)
(Memo Entry Unitemized \$ <u>98,197</u>)				
(b) Political Party Committees		3,220	6,896	11 (b)
(c) Other Political Committees		28,110	93,446	11 (c)
(d) The Candidate				11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		279,057	665,110	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				12
13. LOANS:				
(a) Made or Guaranteed by the Candidate			25,000	13 (a)
(b) All Other Loans				13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b)).			25,000	13 (c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		2	579	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)		4,147	11,707	15
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)		283,206	702,396	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		363,314	950,099	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES				18
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate			25,000	19 (a)
(b) Of All Other Loans				19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19-(a) and 19 (b))			25,000	19 (c)
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees		124	324	20 (a)
(b) Political Party Committees				20 (b)
(c) Other Political Committees		1,000	1,000	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))		1,124	1,324	20 (d)
21. OTHER DISBURSEMENTS				21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)		364,438	976,423	22
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	197,598		23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$	283,206		24
25. SUBTOTAL (Add Line 23 and Line 24)	\$	480,804		25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$	364,438		26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	116,366		27

84020191023

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Ailes Communications 456 West 43rd Street New York, NY 10036	23,200		17,400	5,800
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	2,257	1,757	2,769	1,245
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Sprint Accounts Receivable Department Pittsburgh, PA 15254	757		757	
Nature of Debt (Purpose): Long Distance telephone charges				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
South Central Bell P. O. Box 32440 Louisville, KY 40232	1,370	7,582	7,509	1,443
Nature of Debt (Purpose): Telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	10,123		6,074	4,049
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Datapoint Corporation P. O. Box 93192 Chicago, Illinois 60673	5,808	7,389	8,399	4,798
Nature of Debt (Purpose): Computer equipment				
1) SUBTOTALS This Period This Page (optional)				\$ 17,335
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

84020191024

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207	929	4,705	4,474	1,160
Nature of Debt (Purpose): Airplane rental				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Pitney Bowes 1901 Embassy Square Louisville, KY 40299	448		329	119
Nature of Debt (Purpose): Office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	1,740		1,392	348
Nature of Debt (Purpose): Office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Americall Louisville 10000 Shelbyville Road Louisville, KY 40223		1,090		1,090
Nature of Debt (Purpose): Long Distance Calls				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
AT & T Information Systems 9300 Shelbyville Road, Suite 300 Louisville, KY 40222	743		743	
Nature of Debt (Purpose): Phones				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299	634		634	
Nature of Debt (Purpose): studio taping				
1) SUBTOTALS This Period This Page (optional)				\$2,717
2) TOTAL This Period (last page this line only)				\$-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Copy Corporation 10420 Bluegrass Parkway Jeffersontown, KY 40299	842	(494) (credit)	348	
Nature of Debt (Purpose): office supplies				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	908			908
C. Nature of Debt (Purpose): Airplane Tickets				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Sullivan Screen Printing Company 3808 Fitzgerald Road Louisville, KY 40216	2,009		2,009	
D. Nature of Debt (Purpose): Bumper Stickers				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202		1,941	1,436	505
E. Nature of Debt (Purpose): office supplies				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116		3,757	3,150	607
F. Nature of Debt (Purpose): travel reimbursement				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
G. Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				\$2,020
2) TOTAL This Period (last page this line only)				\$ 22,072
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				

SCHEDULE A

ITEMIZED RECEIPTS

Page 11(a) of for
 LINE NUMBER
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Macdonell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mrs. Jeannette E. Donley 3007 Jarvis Woods Court Louisville, KY 40206 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wm.M.Mercer/Meidinger Inc. Occupation Consultant Aggregate Year-to-Date—\$ 250.00	Date (month, day, year) 09-30-84	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Mr. John H. Kerr, Jr. 124 South Ashland Lexington, KY 40502 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kerr Brothers Funeral Home Occupation Funeral Director Aggregate Year-to-Date—\$ 557.50	Date (month, day, year) 09-21-84	Amount of Each Receipt This Period 500.00
C. Full Name, Mailing Address and ZIP Code Mr. Charles R. Savidge, III Lakeside Otter Lake Estates Hanson, KY 42413 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer South Hopkins Coal CO. Occupation Coal Operator Aggregate Year-to-Date—\$ 1000.00	Date (month, day, year) 09-06-84	Amount of Each Receipt This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Mr. Gerald B. Anderson 1429 Everett Ave., Apt. 3 Louisville, KY 40204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gibbs-Inman Co. Occupation Exec. V.P. Aggregate Year-to-Date—\$ 500.00	Date (month, day, year) 09-14-84	Amount of Each Receipt This Period 500.00
E. Full Name, Mailing Address and ZIP Code Dr. Ernest A. Eggers 3719 Hillsdale Road Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Physician Aggregate Year-to-Date—\$ 1000.00	Date (month, day, year) 09-25-84	Amount of Each Receipt This Period 500.00
F. Full Name, Mailing Address and ZIP Code Mr. Joseph E. Lambert P.O. Box 736 Mt. Vernon, KY 40456 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date—\$ 450.00	Date (month, day, year) 07-23-84	Amount of Each Receipt This Period 250.00
G. Full Name, Mailing Address and ZIP Code Dr. Charles C. Smith 2109 Starmont Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Doctor Aggregate Year-to-Date—\$ 500.00	Date (month, day, year) 09-28-84	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional)			3500.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 50 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Gary H. Baise 8352 Old Dominion Drive McLean, VA 22102	self	09-17-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Dale H. Fisher 3016 Springcrest Drive Louisville, KY 40222	The Cumberland	09-11-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bank President	Aggregate Year-to-Date-\$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240	none	09-17-84	58.97
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date-\$ 333.97	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Pamela Blackstone 4119 Fox Run Lane Owensboro, KY 42301	Blackstone & Schmitt	09-13-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Nursing	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Corinne R. Gay Brookview Farms Pine Grove, KY 40470	Self	07-23-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert T. Manfuso 8401 Connecticut Avenue Chevy Chase, MD 20815	Manfuso Brothers	07-20-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert B. Sutherlin 3636 St. Charles Avenue New Orleans, LA 70115	Audubon Federal Savings & Loan	07-19-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3158.97
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 50 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Dr. Herbert R. Booth U.S. Hwy 42 Box 213 Union, KY 41091	Name of Employer self	Date (month, day, year) 09-24-84	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mr. Sloane Graff, Jr. 3900 Barbour Ln. Box 22311 Louisville, KY 40222	Name of Employer none	Date (month, day, year) 08-20-84	Amount of Each Receipt This Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 245.00	
C. Full Name, Mailing Address and ZIP Code Mr. Russell McConnell Dorset, OH 44032	Name of Employer McConnell Oil Works, Inc.	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation self-employed	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mr. Robert M. Timmerman 22009 Camargo Road Louisville, KY 40207	Name of Employer self employed	Date (month, day, year) 07-30-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Management Consultant	Aggregate Year-to-Date—\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. David C. Brodie P.O. Box 642 Owensboro, KY 42301	Name of Employer none	Date (month, day, year) 09-19-84	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 800.00	
F. Full Name, Mailing Address and ZIP Code Mr. Charles Hagan 755 Chinoe Rd. Lexington, KY 40502	Name of Employer none	Date (month, day, year) 09-25-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$ 270.00	
G. Full Name, Mailing Address and ZIP Code Mr. Joseph A. Moller P. O. Box 626 Scottsdale, AZ 85252	Name of Employer Information Requested	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2165.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 50 for
 LINE NUMBER 1 (a)
 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation retired Aggregate Year-to-Date--\$ 1215.00	Date (month, day, year) 09-14-84	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and ZIP Code Mr. L. Allan Caperton 8202 Wolf Pen Branch Road Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date--\$ 300.00	Date (month, day, year) 09-11-84	Amount of Each Receipt This Period 150.00
C. Full Name, Mailing Address and ZIP Code Mrs. R. H. Hargrove 525 Southfield Road Shreveport, LA 71106 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation housewife Aggregate Year-to-Date--\$ 300.00	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 300.00
D. Full Name, Mailing Address and ZIP Code Mr. C. Gordon Wade 2730 Main Chase Ln. Covington, KY 41017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation business consultant Aggregate Year-to-Date--\$ 1500.00	Date (month, day, year) 09-10-84	Amount of Each Receipt This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Mr. Malcolm G. Chace, Jr. P. O. Box 14246 West Palm Beach, FL 33405 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation retired Aggregate Year-to-Date--\$ 250.00	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 250.00
F. Full Name, Mailing Address and ZIP Code Mr. Mitchell D. Haynes 2490 Tulsa Road Lexington, KY 40503 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Alvin Hayes Trucking Co. Occupation businessman Aggregate Year-to-Date--\$ 500.00	Date (month, day, year) 07-18-84	Amount of Each Receipt This Period 500.00
G. Full Name, Mailing Address and ZIP Code Mr. S. Tilford Payne, Jr. 2514 Poplar Crest Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation Retired Aggregate Year-to-Date--\$ 550.00	Date (month, day, year) 08-21-84	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional)			2900.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 50 for
LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Army Conley

Name of Employer

Information Requested

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

500.00

Staffordsville, KY 41256

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$ 600.00

B. Full Name, Mailing Address and ZIP Code

Mr. Charles Hoke

1114 County Cork Drive

Name of Employer

Hoke Mining Co.

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

1000.00

Murray, KY 42071

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

President/Owner

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert Powers

304 Redding Rd.

Name of Employer

Central Bank and Trust Co.

Date (month,
day, year)

07-10-84

Amount of Each
Receipt This Period

500.00

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Banker

Aggregate Year-to-Date-\$ 530.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Lillie Wrather

1318 Olive Boulevard

Name of Employer

none

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

1000.00

Murray, KY 42071

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Bernard A. Dahlem

604 Briar Hill Road

Name of Employer

self

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

250.00

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Warner Jones, Jr.

Hermitage Farm

U.S. Highway 42

Goshen, KY 40026

Name of Employer

Self employed

Date (month,
day, year)

09-27-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Horse Breeder

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Mary R. Roberts

Route 7

Box 95

Marion, KY 42064

Name of Employer

self

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$ 275.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 6 of 50 for
 LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. John T. Acree, III
 6021 W. Highway 146

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lincoln Income Life Ins. Co.
 08-09-84

Occupation

President

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

Amount of Each
Receipt this Period

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Robert Dooley
 308 Angela Ct.

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lexington Fire Protection
 09-18-84

Occupation

Fireman

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

Amount of Each
Receipt This Period

200.00

C. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Louisville, KY 40243

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
day, year)

09-30-84
 In-Kind
 Office Equipment

Occupation

owner

Aggregate Year-to-Date-\$ 1500.00

Amount of Each
Receipt This Period

625.00

D. Full Name, Mailing Address and ZIP Code

Mr. R. S. Schreiber
 471 West South Street, #502

Kalamazoo, MI 49007

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-09-84
 250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

Amount of Each
Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Leonard W. Arentsen
 1800 Evergreen Road

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

BATUS

Date (month,
day, year)

07-30-84
 250.00

Occupation

V Pres/Controller

Aggregate Year-to-Date-\$ 250.00

Amount of Each
Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Larry C. Ethridge
 2402 Longest Avenue

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84
 500.00

Occupation

attorney

Aggregate Year-to-Date-\$ 500.00

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Joseph E. Lambert
 P.O. Box 736

Mt. Vernon, KY 40456

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-21-84
 200.00

Occupation

attorney

Aggregate Year-to-Date-\$ 450.00

Amount of Each
Receipt This Period

200.00

SUBTOTAL of Receipts This Page (optional) 2325.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Neville Smith 148 Locust Manchester, KY 40962	Name of Employer self employed	Date (month, day, year) 09-04-84	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 700.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Trilby Ball 2124 Griffith Ave Owensboro, KY 42301	Name of Employer self	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date—\$ 350.00	
C. Full Name, Mailing Address and ZIP Code Mr. William E. Fluke 7515 Briarwood Dr. Crestwood, KY 40014	Name of Employer Industrial Belting	Date (month, day, year) 09-30-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date—\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mrs. E. Trine Starnes, Jr. 9801 Westheimer, Suite 1100 Houston, TX 77042	Name of Employer self	Date (month, day, year) 09-28-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. John Paul Blevins County Attorney Metcalfe Co. Courthouse Edmonton, KY 42129	Name of Employer Metcalfe County	Date (month, day, year) 07-30-84	Amount of Each Receipt This Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Attorney	Aggregate Year-to-Date—\$ 1024.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Ruth L. Geary 3614 N. 27th Street Arlington, VA 22207	Name of Employer none	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mr. Gerald Mansbach P. O. Box 1179 Ashland, KY 41101	Name of Employer Mansbach Metal	Date (month, day, year) 09-04-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Principal Owner	Aggregate Year-to-Date—\$ 300.00	
SUBTOTAL of Receipts This Page (optional)			1425.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Enos Swain 156 St. Mildred's Court Danville, KY 40422		Name of Employer none	Date (month, day, year) 09-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired	Amount of Each Receipt This Period 200.00
		Aggregate Year-to-Date-\$ 300.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Mary S. Graham 10504 Florian Rd. Louisville, KY 40223		Name of Employer none	Date (month, day, year) 08-27-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$ 305.00	
C. Full Name, Mailing Address and ZIP Code Mr. William A. Torsiglieri 2 Linden Lane Chatham, NJ 07928		Name of Employer Lloyd Bush & Associates	Date (month, day, year) 08-21-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Analyst	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. John R.S. Brooking 133 Park Road 421 Garrard Street Covington, KY 41011		Name of Employer Self	Date (month, day, year) 08-16-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. Charles Hagan 755 Chinoe Rd. Lexington, KY 40502		Name of Employer none	Date (month, day, year) 09-30-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$ 270.00	
F. Full Name, Mailing Address and ZIP Code Mr. John Boyer Moore 301 East Vine Street Lexington, KY 40507		Name of Employer Johnson Romonowitz, Inc.	Date (month, day, year) 09-21-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Architect	Amount of Each Receipt This Period 30.00
		Aggregate Year-to-Date-\$ 230.00	
G. Full Name, Mailing Address and ZIP Code Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261		Name of Employer none	Date (month, day, year) 09-30-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired	Amount of Each Receipt This Period 785.00
		Aggregate Year-to-Date-\$ 1215.00	
SUBTOTAL of Receipts This Page (optional)			2415.00
TOTAL This Period (last page this line number only)			

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. L. Allan Caperton 8202 Wolf Pen Branch Road Prospect, KY 40059		Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date--\$ 300.00	Date (month, day, year) 09-11-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt this Period 150.00	
B. Full Name, Mailing Address and ZIP Code Mr. James W. Harkess 3011 Lighthead Road Louisville, KY 40222		Name of Employer self Occupation Orthopaedic Surgeon Aggregate Year-to-Date--\$ 275.00	Date (month, day, year) 07-31-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 100.00	
C. Full Name, Mailing Address and ZIP Code Mr. Mike J. Odle 207 Donna Drive Henderson, KY 42420		Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date--\$ 1000.00	Date (month, day, year) 09-28-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 1000.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Jill Wade 2730 Main Chase Lane Covington, KY 41017		Name of Employer self Occupation homemaker Aggregate Year-to-Date--\$ 1000.00	Date (month, day, year) 09-10-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 1000.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Carol Chambers P. O. Box 3908 Evansville, IN 47737		Name of Employer self employed Occupation Homemaker Aggregate Year-to-Date--\$ 250.00	Date (month, day, year) 07-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 250.00	
F. Full Name, Mailing Address and ZIP Code Mr. Ted Heideman 103 Chipping Way, #1 Louisville, KY 40222		Name of Employer Louisville Manufacturing Occupation Exec. Vice President Aggregate Year-to-Date--\$ 1000.00	Date (month, day, year) 09-20-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Stephen M. Peck P.P.N. Partners 1 New York Plaza New York, NY 10004		Name of Employer P. P. N. Partners Occupation businessman Aggregate Year-to-Date--\$ 500.00	Date (month, day, year) 07-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Amount of Each Receipt This Period 500.00	
SUBTOTAL of Receipts This Page (optional)			4000.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Dudley A. White 247 Roblar Avenue Santa Ynez, CA 93460	Multi Media Management, Inc.	08-07-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate Executive	Aggregate Year-to-Date--\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Larry N. Cook 2011 Woodford Place Louisville, KY 40205	Self Employed	09-05-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date--\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Thomas L. Holton 108 Perkins Road Greenwich, CT 06830	Information Requested	07-26-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date--\$	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Bonnie Quantrell Quantrell Cadillac, Inc. 1490 New Circle Road, NE Lexington, KY 40509	Quantrell Cadillac	09-04-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Aggregate Year-to-Date--\$	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George L. Wright Route 7, Box 653 Russell Springs, KY 42642	none	07-16-84	10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date--\$	310.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, KY 40205	Dauenhauer Plumbing & Heating Co	09-24-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Contractor	Aggregate Year-to-Date--\$	700.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert H. Kamman 2313 Clarkwood Road Louisville, KY 40207	Gibbs Inman Co.	09-14-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Printer	Aggregate Year-to-Date--\$	750.00
SUBTOTAL of Receipts This Page (optional)			2210.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. C. A. Robinson 1410 North Cullen P. O. Box 5269 Evansville, IN 47715		Name of Employer Robinson Engineering	Date (month, day, year) 07-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date—\$	250.00
B. Full Name, Mailing Address and ZIP Code Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501		Name of Employer Adams & Adams	Date (month, day, year) 07-23-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation attorney	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date—\$	225.00
C. Full Name, Mailing Address and ZIP Code Mr. Dennis T. Dorton 102 Twin Oak Dr. Paintsville, KY 41240		Name of Employer Citizens National Bank	Date (month, day, year) 07-31-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Banker	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date—\$	1000.00
D. Full Name, Mailing Address and ZIP Code Mr. Forest Kinser P. O. Box 364 Leitchfield, KY 42754		Name of Employer self	Date (month, day, year) 07-03-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation farmer	Amount of Each Receipt This Period 15.00
		Aggregate Year-to-Date—\$	215.00
E. Full Name, Mailing Address and ZIP Code Ms. Norma Jean Scott 4000 Buffalo Trace Madisonville, KY 42431		Name of Employer Fugate Lumber Co.	Date (month, day, year) 07-16-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Amount of Each Receipt This Period 25.00
		Aggregate Year-to-Date—\$	225.00
F. Full Name, Mailing Address and ZIP Code Mr. Lee M. Arthurs 319 Avenue C, #9F New York, NY 10009		Name of Employer Lloyd Bush & Associates	Date (month, day, year) 08-21-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Analyst	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date—\$	1000.00
G. Full Name, Mailing Address and ZIP Code Mrs. Carrie E. Evans 3600 Montclair Avenue Louisville, KY 40218		Name of Employer self	Date (month, day, year) 08-31-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 10.00
		Aggregate Year-to-Date—\$	210.00
SUBTOTAL of Receipts This Page (optional)			2400.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. M. J. Lamond
 211 Avon Road

Cherry Hill, NJ 08034

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Packard Press

Date (month,
 day, year)

07-26-84

Amount of Each
 Receipt this Period

1000.00

Occupation

financial officer

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Vertner D. Smith, Jr.
 122 Arrowhead Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self/Vertner D. Smith Co.

Date (month,
 day, year)

08-02-84

Amount of Each
 Receipt This Period

500.00

Occupation

President-Owner

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Patricia W. Ballard
 2801 Rainbow Drive

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Greenbaum, Doll & McDonald

Date (month,
 day, year)

09-07-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 1500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Newell Fox
 8800 Denington Drive

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Burger King Franchise

Date (month,
 day, year)

09-30-84

Amount of Each
 Receipt This Period

500.00

Occupation

Restauranteer

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Betty M. Linn
 3614 N. 27th Street

Arlington, VA 22207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. E. Trines Starnes, Jr.
 9801 Westheimer, Suite 1100

Houston, TX 77042

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Century Capital Corp.

Date (month,
 day, year)

09-28-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Chairman

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. John Paul Blevins
 County Attorney
 Metcalfe Co. Courthouse
 Edmonton, KY 42129

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Metcalfe County

Date (month,
 day, year)

08-03-84

Amount of Each
 Receipt This Period

975.00

Occupation

County Attorney

Aggregate Year-to-Date-\$ 1024.00

SUBTOTAL of Receipts This Page (optional)

5225.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Kenneth W. Gemmill 741 Grenoble Road Jamison, PA 18929	none	08-23-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>retired</u>	Aggregate Year-to-Date-\$ <u>500.00</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Gerald Mansbach P. O. Box 1179 Ashland, KY 41101	Mansbach Metal	09-13-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Principal Owner</u>	Aggregate Year-to-Date-\$ <u>300.00</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Alice Tatum 515 Fountain Avenue Georgetown, KY 40324	Information Requested	09-04-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Information Requested</u>	Aggregate Year-to-Date-\$ <u>500.00</u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Brooks H. Bower 8619 Nottingham Parkway Louisville, KY 40222	Papercone Corporation	09-11-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Information Requested</u>	Aggregate Year-to-Date-\$ <u>250.00</u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Mary S. Graham 10504 Florian Rd. Louisville, KY 40223	none	09-10-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Retired</u>	Aggregate Year-to-Date-\$ <u>305.00</u>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Christina Lee Brown Poplar Terrace 6501 Longview Lane Louisville, KY 40222	self	07-20-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>housewife</u>	Aggregate Year-to-Date-\$ <u>1000.00</u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Miles Haman Apt. 305 Charleston Apts. Paducah, KY 42001	none	07-17-84	400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>none</u>	Aggregate Year-to-Date-\$ <u>750.00</u>	
SUBTOTAL of Receipts This Page (optional)			2750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Lester D. Moore 1639 East Blackford Avenue Evansville, IN 47714	Moore Engineering	07-26-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261	none	09-30-84	215.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 1215.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Betty Dubbs Cardinal 2770 South Ocean Palm Beach, FL 33480	Information Requested	09-21-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John D. Harper Route 2, Box 336 Shepherdsville, KY 40165	Powered Pipe	08-03-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date—\$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. William N. Offutt, IV 135 E. Maxwell Street Lexington, KY 40508	self	09-25-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D. F.A.C.S. Physician	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Herman R. Charbonneau 171 Kilburn Road Garden City, NY 11530	Chemical Bank	07-26-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ralph L. Hennebach 33 Tennyson Drive Short Hills, NJ 07078	Asarco, Inc.	08-09-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date—\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			2415.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Lynda Y. Peppard
7237 Stefani Drive

Dallas, TX 75225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-26-84

Amount of Each
Receipt this Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Mary A. Whittle
22 Public Square

Leitchfield, KY 42754

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

12.50

Occupation

homemaker

Aggregate Year-to-Date-\$ 212.50

C. Full Name, Mailing Address and ZIP Code

Mr. Caleb B. Cooley
P. O. Box 2707

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cooley Hall & Harris PSC

Date (month,
day, year)

09-27-84

Amount of Each
Receipt This Period

400.00

Occupation

CPA

Aggregate Year-to-Date-\$ 400.00

D. Full Name, Mailing Address and ZIP Code

Mr. Robert B. Horner
4001 Glenarm Road

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-07-84

Amount of Each
Receipt This Period

200.00

Occupation

farmer

Aggregate Year-to-Date-\$ 400.00

E. Full Name, Mailing Address and ZIP Code

Mr. John C. Quiggins
681 Chandler Avenue

Radcliff, KY 40160

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

1000.00

Occupation

realtor

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Warren Wright, Jr.
3305 Versailles Rd

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wright Enterprises

Date (month,
day, year)

09-14-84

Amount of Each
Receipt This Period

1000.00

Occupation

owner

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

Mr. David L. Daugherty
1209 Wellington Place, North

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Daugherty & Trautwein, Inc.

Date (month,
day, year)

09-04-84

Amount of Each
Receipt This Period

1000.00

Occupation

Professional Engineer

Aggregate Year-to-Date-\$ 1250.00

SUBTOTAL of Receipts This Page (optional)

4112.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be told or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Mr. Robert H. Kamman 2313 Clarkwood Road Louisville, KY 40207		Gibbs Inman Co.	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Printer	
		Aggregate Year-to-Date-\$ 750.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. John W. Robinson 8906 Peterborough Dr. Louisville, KY 40222		Homebuilders Assn. of Lou., Inc.	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation executive	
		Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501		Adams & Adams	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation attorney	
		Aggregate Year-to-Date-\$ 225.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Norman V. Kinsey Suite 1805, Louisiana Tower 401 Edwards Street Shreveport, LA 71101		Kinsey Interest	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation president	
		Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Ms. Norma Jean Scott 4000 Buffalo Trace Madisonville, KY 42431		Fugate Lumber Co.	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	
		Aggregate Year-to-Date-\$ 225.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Robert Lawrence Ashe, Jr. 230 Peachtree Street, NW Suite 1100 Atlanta, GA 30303		self	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Lawyer	
		Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Carrie E. Evans 3600 Montclair Avenue Louisville, KY 40218		self	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	
		Aggregate Year-to-Date-\$ 210.00	
SUBTOTAL of Receipts This Page (optional)			3175.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Alice H. Lancaster 4620 Upper River Road Louisville, KY 40222	self	09-26-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Alida S. Snow P. O. Box 23 Martinsburg, VA 22480	self	08-09-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation housewife	Aggregate Year-to-Date—\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Charles D. Barnett 311 Cocoonut Row Palm Beach, FL 33480	self	07-09-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	1000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert E. Fox 1405 Meganwood Circle Lexington, KY 40502	Jura Energy Consultants	08-16-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Geologists	Aggregate Year-to-Date—\$	450.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Benjamin I. Steiner 40 April Lane Huntingdon Valley, PA 19006	Packard Press	08-06-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice-President of Finance	Aggregate Year-to-Date—\$	1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John Paul Blevins County Attorney Metcalfe Co. Courthouse Edmonton, KY 42129	Metcalfe County	08-03-84	24.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Attorney	Aggregate Year-to-Date—\$	1024.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. R. L. Gilde P.O. Box 32215 4061 McCollum Ct. Louisville, KY 40232	Industrial Belting & Trans. Inc	09-30-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$	500.00
SUBTOTAL of Receipts This Page (optional)			4224.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Samuel S. Mansbach
 P.O. Box 1179

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
 day, year)

09-04-84

Amount of Each
 Receipt this Period

100.00

Occupation

Principle Owner

Aggregate Year-to-Date-\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. G. E. Taylor
 P. O. Box 575

Bridgeport, TX 76026

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

250.00

Occupation

self employed

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harris Bowers
 4060 Buffalo Trace

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

09-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Mary S. Graham
 10504 Florian Rd.

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

09-24-84

Amount of Each
 Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date-\$ 305.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert A. Mickler
 444 Bristol Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Bob Mickler's Inc.

Date (month,
 day, year)

09-17-84

Amount of Each
 Receipt This Period

100.00

Occupation

retailer

Aggregate Year-to-Date-\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
 Apt. 305
 Charleston Apts.
 Paducah, KY 42001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-14-84

Amount of Each
 Receipt This Period

300.00

Occupation

none

Aggregate Year-to-Date-\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Belle Clay Morton
 5815 Round Hill Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

09-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Martine C. Tway
 5100 Brownsboro Road, Apt. 1213
 Louisville, KY 40208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-24-84

Amount of Each
Receipt this Period

500.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 Leith Lane, Apt. #715

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

McConnell Senate Committee

Date (month,
day, year)

07-13-84

Amount of Each
Receipt This Period

5.00

Occupation

Political Consultant

Aggregate Year-to-Date-\$ 310.00

C. Full Name, Mailing Address and ZIP Code

Mr. Kenneth R. Harshberger
 12351 Apache Pass ...

Evansville, IN 47712

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-28-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. George H. Warren, Jr.
 1247 Laurel Drive

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Zogg Oil Company

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

250.00

Occupation

Oil & Gas Developer

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Clyde Childers, Sr.
 310 Scott Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-20-84

Amount of Each
Receipt This Period

1000.00

Occupation

Retired

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Floyd T. Hensley, Jr.
 Route 3 Box 348
 1822 N. 68 Highway
 Campbellsville, KY 42718

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Taylor County Bank

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

500.00

Occupation

Banker

Aggregate Year-to-Date-\$ 700.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Lena Pfeffer
 156 William Street

Hazlet, NJ 07730

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lloyd Bush & Associates

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

1000.00

Occupation

Vice President

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

4255.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Mary A. Whittle
 22 Public Square

Leitchfield, KY 42754

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

09-21-84

Amount of Each
 Receipt this Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 212.50

B. Full Name, Mailing Address and ZIP Code

Ms. Janet H. Coors
 718 W. Roller Coaster Road

Tucson, AZ 85704

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

09-21-84

Amount of Each
 Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. David L. Huber
 2335 Village Drive

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jefferson County Gov.

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

500.00

Occupation

C E O

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. David A. Raese
 Lebanon Ave.

Morgantown, WV 26505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dominion Post

Date (month,
 day, year)

07-19-84

Amount of Each
 Receipt This Period

1000.00

Occupation

sports writer/newspaper

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Dr. Lloyd G. Yopp
 517 Briar Hill Road

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

07-31-84

Amount of Each
 Receipt This Period

150.00

Occupation

M.D.

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
 643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
 day, year)

07-09-84

Amount of Each
 Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 380.00

G. Full Name, Mailing Address and ZIP Code

Mr. Fred G. Karem
 2068 Von List Way

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Shuffett, Kenton, Curry & Karem

Date (month,
 day, year)

09-12-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 1900.00

SUBTOTAL of Receipts This Page (optional)

3275.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jose Luis Rodriguez 4597 St. Andrews Road Boynton Beach, FL 33436	Corky Foods Corp.	09-28-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date-\$	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Theodore A. Adams, Jr. 6551 Loisdale Court Springfield, VA 22150	Unifed Industries Incorporated	07-12-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate Executive	Aggregate Year-to-Date-\$	1000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Haden Kirkpatrick P. O. Box 11788 Lexington, KY 40578	The Thoroughbred Press Co., Inc.	09-28-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$	349.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Catherine M. Shallcross 4816 Bainbridge Row Drive Louisville, KY 40207	self	09-06-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	450.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. William W. Lawrence 607 Cressbrook Drive Louisville, KY 40206	self	09-14-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$	300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. R. C. Soaper P.O. Box 215 Henderson, KY 42420	Soaper Chemical	07-26-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Jane Norton Barrett 8221 Wolf Pen Branch Road Prospect, KY 40059	self	09-27-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	2000.00
SUBTOTAL of Receipts This Page (optional)			3400.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Curtiss E. Frank 7 Butternut Hollow Road Greenwich, CT 06830	Name of Employer National Executive Serv. Corp.	Date (month, day, year) 08-13-84	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation president	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. D. Irving Long 2112 River Bluff Road Louisville, KY 40207	Name of Employer 4th Ave. Corporation	Date (month, day, year) 09-10-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President-real Estate	Aggregate Year-to-Date—\$ 300.00	
C. Full Name, Mailing Address and ZIP Code Mr. A. Clay Stewart 1313 Richmond Road Lexington, KY 40502	Name of Employer none	Date (month, day, year) 07-13-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 2000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Joseph A. Blitzko 12004 Log Cabin Lane Anchorage, KY 40223	Name of Employer Touche Ross	Date (month, day, year) 08-28-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant	Aggregate Year-to-Date—\$ 300.00	
E. Full Name, Mailing Address and ZIP Code Mr. Louis R. Glogower, Jr. 5100 Brownsboro Rd., #732 Louisville, KY 40222	Name of Employer Information Requested	Date (month, day, year) 09-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. George J. Marlin Marine Midland Bank, N.A. 40 Wall Street New York, NY 10005	Name of Employer Marine Midland Bank	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Ms. Joy W. Taylor 2930 Kent Drive Oklahoma City, OK 73120	Name of Employer none	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2950.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Janice Bowers
4060 Buffalo Trace

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt this Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date—\$

1200.00

B. Full Name, Mailing Address and ZIP Code

Mr. George F. Green
124 Craig Street

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date—\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William F. Miles
Route 2
Box 133

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Process Machinery, Inc

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

200.00

Occupation

Chairman of Board

Aggregate Year-to-Date—\$

225.00

D. Full Name, Mailing Address and ZIP Code

Mrs. W. Waverly Townes
542 Garden Drive

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

750.00

Occupation

homemaker

Aggregate Year-to-Date—\$

750.00

E. Full Name, Mailing Address and ZIP Code

Mr. I. H. Buchanan, Jr.
151 Parkway

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

200.00

Occupation

Coal Operator

Aggregate Year-to-Date—\$

700.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
Apt. 305
Charleston Apts.
Paducah, KY 42001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

50.00

Occupation

none

Aggregate Year-to-Date—\$

750.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Louise Urbina
3000 SW 128th Avenue

Miami, FL 33175

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date—\$

250.00

SUBTOTAL of Receipts This Page (optional)

3450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 Leith Lane, Apt. #715

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

McConnell Senate Committee
 07-23-84

Occupation

Political Consultant

Aggregate Year-to-Date-\$ 310.00

Date (month,
 day, year)

Amount of Each
 Receipt this Period

45.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Linda P. Harshberger
 12351 Apache Pass

Evansville, IN 47712

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harvey Olmstead
 1776 S. Jackson
 Suite 902

Denver, CO 80210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Harvey Olmstead Co.

Occupation

partner

Aggregate Year-to-Date-\$ 500.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

500.00

D. Full Name, Mailing Address and ZIP Code

Dr. Richard Weddle
 208 College Street

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Britthaven Corp.

Occupation

Physician

Aggregate Year-to-Date-\$ 300.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

100.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Barbara Bullitt Christian
 3601 Axton Lane
 Frogs Jump Skyline
 Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Investments

Aggregate Year-to-Date-\$ 450.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Thomas L. Hensley
 6206 N. Hitt Rd.

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Druthers, Inc.

Occupation

President

Aggregate Year-to-Date-\$ 1000.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Gerald H. Phipps
 P. O. Box 4387

Denver, CO 80204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Gerald H. Phipps, Inc.

Occupation

General Contractor

Aggregate Year-to-Date-\$ 500.00

Date (month,
 day, year)

Amount of Each
 Receipt This Period

500.00

SUBTOTAL of Receipts This Page (optional)

3395.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Benny G. Williams
812 South Broad Street

Thomasville, GA 31792

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-20-84

Amount of Each
Receipt this Period

1000.00

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. James P. Cowles
P. O. Box 2160

Spokane, WA 99203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Inland Empire Paper Company

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Melanie C. Huber
2335 Village Drive

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Everett Rains
P.O. Box 8

Williamsburg, KY 40769

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Whitley County

Date (month,
day, year)

08-29-84

Amount of Each
Receipt This Period

50.00

Occupation

County Clerk

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. David A. York
4106 Fairfax Court

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

200.00

Occupation

CPA

Aggregate Year-to-Date-\$ 225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

08-01-84

Amount of Each
Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 380.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Jan S. Karzen
515 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Paul Semonin Co.

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

500.00

Occupation

Real Estate

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

2525.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)			
<u>McConnell Senate Committee</u>			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ernie Rogers PO Box 162 <u>Pikeville, KY 41501</u>	Information Requested	09-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Information Requested		
	Aggregate Year-to-Date-\$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Mervin K. Eblen 308 Main Street <u>Hazard, KY 41701</u>	self	07-23-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Attorney		
	Aggregate Year-to-Date-\$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. R. Keller Kitchen 2103 Twin Hill Road <u>Louisville, KY 40207</u>	KY Machinery	09-05-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	President		
	Aggregate Year-to-Date-\$	750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Catherine M. Shallcross 1816 Bainbridge Row Drive <u>Louisville, KY 40207</u>	self	09-11-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	homemaker		
	Aggregate Year-to-Date-\$	450.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Barbara C. Ferguson 1006 Doric Circle <u>Louisville, KY 40205</u>	self	07-20-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	homemaker		
	Aggregate Year-to-Date-\$	1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ronald LeMaster P.O.Box 425 <u>South Shore, KY 41175</u>	Ron LeMaster Insurance, Inc.	09-30-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Insurance Agent		
	Aggregate Year-to-Date-\$	1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. E. E. Spear <u>Kettle, KY 42752</u>	none	07-18-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	retired farmer		
	Aggregate Year-to-Date-\$	250.00	
SUBTOTAL of Receipts This Page (optional)			3050.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Donald C. Barton
1014 Circle Drive

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

09-18-84

Amount of Each
Receipt this Period

500.00

Occupation

Physician

Aggregate Year-to-Date--\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Alice K. Frankel, II
Bluegrass Road

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-16-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date--\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Fred V. Lucas
207 W. 7th St.

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date--\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Ann Stewart
P.O. Box 130

Brownsville, KY 42210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

587.50

Occupation

homemaker

Aggregate Year-to-Date--\$ 587.50

E. Full Name, Mailing Address and ZIP Code

Mr. Joseph A. Blitzko
12004 Log Cabin Lane

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Touche Ross

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

200.00

Occupation

Accountant

Aggregate Year-to-Date--\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Robert W. Marshall
1054 Alta Vista Road

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-11-84

Amount of Each
Receipt This Period

750.00

Occupation

Information Requested

Aggregate Year-to-Date--\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mr. Jack I. Branham, Jr.
P. O. Box 433

Betsy Layne, KY 41605

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

100.00

Occupation

Retired

Aggregate Year-to-Date--\$ 300.00

SUBTOTAL of Receipts This Page (optional) 2487.50

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Elmo Greer P.O. Box 730 London, KY 40741	Name of Employer Corbin Deposit Bank	Date (month, day, year) 08-29-84	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Clarence Miller Rt. 8 Shelbyville, KY 40065	Name of Employer none	Date (month, day, year) 09-06-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. Richard M. Trautwein 8220 Wolf Pen Branch Rd. Prospect, KY 40059	Name of Employer Barnett & Alagia	Date (month, day, year) 09-19-84	Amount of Each Receipt This Period 840.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 840.00	
D. Full Name, Mailing Address and ZIP Code Mr. Raymond L. Buse, Jr. P.O. Box 709 Covington, KY 41094	Name of Employer Buse Financial Services	Date (month, day, year) 09-24-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Advisor	Aggregate Year-to-Date—\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Arthur B. Hancock, III Rt 2 Winchester Rd Stone Farm Paris, KY 40361	Name of Employer Self	Date (month, day, year) 09-25-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation horse farmer	Aggregate Year-to-Date—\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Ms. Joan Scheele Mueller 844 Morningside Drive Ridgewood, NJ 07450	Name of Employer none	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mr. Isaac VanMeter Rt. 5, Edgemont Rd. Maysville, KY 41056	Name of Employer	Date (month, day, year) 09-12-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3940.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
Leith Lane, Apt. #715

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

McConnell Senate Committee
08-13-84

Occupation

Political Consultant

Aggregate Year-to-Date-\$ 310.00

Date (month,
day, year)

Amount of Each
Receipt this Period

160.00

B. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Retired

Aggregate Year-to-Date-\$ 250.00

Date (month,
day, year)

08-20-84

Amount of Each
Receipt This Period

100.00

C. Full Name, Mailing Address and ZIP Code

Mr. Thomas L. Ossenbergl
3314 Bayard Park Drive

Evansville, IN 47715

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Strouse & Bros., Inc.

Occupation

Vice President

Aggregate Year-to-Date-\$ 250.00

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Charles L. Weisberg
1400 Willow Ave., #1901

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Occupation

Antique Dealer

Aggregate Year-to-Date-\$ 250.00

Date (month,
day, year)

08-21-84

Amount of Each
Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Dr. Charles D. Clark
801 S. 16 Street

Murray, KY 42071

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Physician

Aggregate Year-to-Date-\$ 2000.00

Date (month,
day, year)

08-30-84

Amount of Each
Receipt This Period

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Francisco J. Hernandez
9600 S. W. 93rd Avenue

Miami, FL 33176

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Agro Tech International

Occupation

president

Aggregate Year-to-Date-\$ 500.00

Date (month,
day, year)

09-28-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. R. H. Pickens
800 Preston State Bank Bldg.

Dallas, TX 75225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Pickens Co., Inc.

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3260.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. David L. Williams 210 Allen Street Burkesville, KY 42717	Name of Employer Cumberland County	Date (month, day, year) 07-18-84	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Court Clerk	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Joan E. Cox 187 N. Bellaire Ave. Louisville, KY 40206	Name of Employer Humana	Date (month, day, year) 08-06-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date—\$ 450.00	
C. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	Name of Employer Self Employed	Date (month, day, year) 09-30-84	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Aggregate Year-to-Date—\$ 800.00	In-Kind Campaign Car
D. Full Name, Mailing Address and ZIP Code Mr. John H. Rasnick P. O. Box 933 Pikeville, KY 41501	Name of Employer Summitt Engineering	Date (month, day, year) 09-21-84	Amount of Each Receipt This Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$ 700.00	
E. Full Name, Mailing Address and ZIP Code Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302	Name of Employer Zogg Oil Company	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil & Gas Developer	Aggregate Year-to-Date—\$ 1280.00	
F. Full Name, Mailing Address and ZIP Code Mr. Russell Harris Davis, Sr. 643 North 29th Street Louisville, KY 40212	Name of Employer Lou. & Jeff. Co. Conv. Bureau	Date (month, day, year) 09-05-84	Amount of Each Receipt This Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Clerk	Aggregate Year-to-Date—\$ 380.00	
G. Full Name, Mailing Address and ZIP Code Mr. Ron Karzen 515 Country Lane Louisville, KY 40222	Name of Employer Self employed	Date (month, day, year) 09-06-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Builder	Aggregate Year-to-Date—\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2025.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Robert S. Rosenbaum R. S. Rosenbaum Co. 425 Hudson Street New York, NY 10014	Name of Employer R. S. Rosenbaum Co.	Date (month, day, year) 08-13-84	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Mr. Bernard M. Althoff 34 Mendota Avenue Rye, NY 10580	Name of Employer Satterler-Stephens	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Mervin K. Eblen 308 Main Street Hazard, KY 41701	Name of Employer self	Date (month, day, year) 07-26-84	Amount of Each Receipt This Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Hattie B. Klein 6005 Orion Road Louisville, KY 40222	Name of Employer self	Date (month, day, year) 07-19-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. James A. Shuffett 1200 Second National Plaza Lexington, KY 40507	Name of Employer self	Date (month, day, year) 09-17-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Minx Auerbach 1400 Willow, #405 Louisville, KY 40204	Name of Employer Interior Directions	Date (month, day, year) 09-21-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Pamela H. Ferguson 180 Scranton Court Zionsville, IN 46077	Name of Employer self	Date (month, day, year) 09-28-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4450.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Lewis
104 Bentley Avenue
P. O. Box 180
Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

08-17-84

Amount of Each
Receipt this Period

100.00

Occupation

Grocer

Aggregate Year-to-Date--\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Paul E. Spear
HCR 4, Box 387

Covington, KY 42752

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cumberland County

Date (month,
day, year)

07-18-84

Amount of Each
Receipt This Period

250.00

Occupation

Circuit Court Clerk

Aggregate Year-to-Date--\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gordon H. Berg
175 Federal Street

Boston, MA 02110

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Berg & Co.

Date (month,
day, year)

09-28-84

Amount of Each
Receipt This Period

1000.00

Occupation

investment banker

Aggregate Year-to-Date--\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Alice K. Frankel, II
Bluegrass Road

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

50.00

Occupation

homemaker

Aggregate Year-to-Date--\$ 300.00

E. Full Name, Mailing Address and ZIP Code

Mr. T. D. Lockett, II
425 Lightfoot Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date--\$ 700.00

F. Full Name, Mailing Address and ZIP Code

Dr. Lowell L. Stokes
440 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

300.00

Occupation

Doctor

Aggregate Year-to-Date--\$ 300.00

G. Full Name, Mailing Address and ZIP Code

Dr. Eli C. Boggs
281 E. Main Street

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Physician

Aggregate Year-to-Date--\$ 600.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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 (Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Steven Goodman 2406 Merrick Road Louisville, KY 40207	Byck Bros & Co	07-26-84	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retail	Aggregate Year-to-Date—\$	225.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Jorge L. Mas 10441 SW 187th Street Orrine, FL 33157	Chuch & Tower of Florida, Inc.	09-28-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Joseph Buz Tharp, III 134 Main Street Paintsville, KY 41240	Brandeis Machinery	09-18-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date—\$	400.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Jack I. Branham, Jr. P. O. Box 433 Betsy Layne, KY 41605	none	09-10-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$	300.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Wendell Gunn 3254 Saxon Drive Lexington, KY 40503	KY Central	09-21-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Aggregate Year-to-Date—\$	300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Dennis Miller 7209 Columbia Avenue Louisville, KY 40222	Industrial Belting	09-30-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation vice president	Aggregate Year-to-Date—\$	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert T. Trautwein 7814 Pine Ridge Rd. Louisville, KY 40222	Self-Daugherty, Trautwein, & Har	09-04-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professional Engineer	Aggregate Year-to-Date—\$	1000.00
SUBTOTAL of Receipts This Page (optional)			2375.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Lloyd A. Bush 156 William Street New York, NY 10038	Name of Employer Lloyd Bush & Assoc.	Date (month, day, year) 08-13-84	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation software/Financial Consultant	Aggregate Year-to-Date—\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Seth W. Hancock Claiborne Farm Route 2 Paris, KY 40361	Name of Employer Self	Date (month, day, year) 08-23-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Thoroughbred Breeder	Aggregate Year-to-Date—\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Mr. F. P. Mullins 1612 Gardiner Lane, Unit-207 Louisville, KY 40205	Name of Employer Information Requested	Date (month, day, year) 09-14-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Raymond E. Veal 8205 Hobcaw Lane Lexington, KY 40502	Name of Employer self	Date (month, day, year) 07-03-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation realtor	Aggregate Year-to-Date—\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack Leith Lane, Apt. #715 Louisville, KY 40218	Name of Employer McConnell Senate Committee	Date (month, day, year) 08-28-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Political Consultant	Aggregate Year-to-Date—\$ 310.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Helen E. Hatcher The Lodge Highland Farms Black Mountain, NC 28711	Name of Employer none	Date (month, day, year) 08-13-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mr. James L. Paliafito 1309 Park Shore Road La Grange, KY 40031	Name of Employer Arabian Horses	Date (month, day, year) 09-18-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3600.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Y. Peyton Wells, Sr. 94 Warrior Road Louisville, KY 40207	none	08-29-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$	1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George E. Clark 1400 Willow-2101 Louisville, KY 40204	Jeff. Co. Economic Development	08-21-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date—\$	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Fred Hervey P. O. Box 20000 El Paso, TX 79998	The Circle K...Corp	08-27-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date—\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. W. V. Pierce 822 North Ft. Thomas Avenue Fort Thomas, KY 41075	none	08-20-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired physician	Aggregate Year-to-Date—\$	210.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. David K. Wilson 3022 Vanderbilt Place P. O. Box 121559 Nashville, TN 37212	Cherokee Equity Corp.	08-09-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$	1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. James D. Crase 600 Little Creek Road Somerset, KY 42501	Self	08-15-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. I. W. Hughes 159 Westwind Rd. Louisville, KY 40207	Brown & Williamson	08-15-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date—\$	250.00
SUBTOTAL of Receipts This Page (optional)			3030.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Ben A. Reid, Jr. 98 Warrior Road Louisville, KY 40207	Self employed	08-29-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. John W. Deming 3600 Parliament Drive Alexandria, LA 71301	self employed	07-26-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Morton Kasdan 600 Col. Anderson Pkwy. Louisville, KY 40222	Morton L Kasdan, M.D., F.A.C.S.	07-06-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Betty M. Rosenthal 751 Cottage Grove Lane Lexington, KY 40502	self	09-04-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Mervin K. Eblen 308 Main Street Hazard, KY 41701	self	09-17-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Alan S. Kopatz 4061 McCollum Court Louisville, KY 40218	Industrial Belting	09-30-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation vice president	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Vicki C. Sistrunk 4018 Deer Lake Cr. Prospect, KY 40059	Jefferson County Gov.	08-03-84	5.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Secretary	Aggregate Year-to-Date-\$ 257.00	
SUBTOTAL of Receipts This Page (optional)			1955.00
TOTAL This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Scott K. Ferguson
180 Scranton Court

Zionsville, IN 46077

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-28-84

Amount of Each
Receipt this Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Harry Lewman
125 Chenoweth Lane, Suite 300

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Harry Lewman Co.

Date (month,
day, year)

08-20-84

Amount of Each
Receipt This Period

30.00

Occupation

Realtor

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. and Mrs. Jack P. Spradlin
6903 Wythe Hill Circle

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lincoln Federal/Self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

25.00

Occupation

President/Homemaker

Aggregate Year-to-Date-\$ 225.00

D. Full Name, Mailing Address and ZIP Code

Mr. George D. Besler
1485 Park Avenue

New York, NY 10022

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. J. N. Frankel
Bluegrass Pike

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Frankel's Dept. Store

Date (month,
day, year)

08-16-84

Amount of Each
Receipt This Period

250.00

Occupation

Owner

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. James E. Lyon
2001 Kirby Drive, Suite 1300

Houston, TX 77019

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

D. R. R. Investments

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

500.00

Occupation

Investments

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Charles E. Stoll
527 Club Ln.

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-06-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$ 280.00

SUBTOTAL of Receipts This Page (optional)

2085.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1 (3)
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Dr. Eli C. Boggs 281 E. Main Street Hazard, KY 41701 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation Physician Aggregate Year-to-Date-\$ 600.00	Date (month, day, year) 09-26-84	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and ZIP Code Ms. Phyllis Goroway 156 William Street New York, NY 10038 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lloyd Bush & Assoc. Occupation office manager Aggregate Year-to-Date-\$ 1000.00	Date (month, day, year) 09-28-84	Amount of Each Receipt This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Mr. Hulin Mattingly Lexington Road Danville, KY 40422 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date-\$ 250.00	Date (month, day, year) 09-18-84	Amount of Each Receipt This Period 250.00
D. Full Name, Mailing Address and ZIP Code Mr. Joseph Buz Tharp, III 134 Main Street Paintsville, KY 41240 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Brandeis Machinery Occupation Owner Aggregate Year-to-Date-\$ 400.00	Date (month, day, year) 09-18-84	Amount of Each Receipt This Period 200.00
E. Full Name, Mailing Address and ZIP Code Mrs. Zana R. Brimm 3225 Rosewedge Way Louisville, KY 40216 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation Retired Aggregate Year-to-Date-\$ 256.00	Date (month, day, year) 07-18-84	Amount of Each Receipt This Period 25.00
F. Full Name, Mailing Address and ZIP Code Mr. H. R. Gustafson S 2034 Parkwood Circle Spokane, WA 99203 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation retired Aggregate Year-to-Date-\$ 250.00	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 250.00
G. Full Name, Mailing Address and ZIP Code Mrs. Margaret K. Miller 1222 Manitau Avenue Louisville, KY 40215 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self employed Occupation Homemaker Aggregate Year-to-Date-\$ 1000.00	Date (month, day, year) 08-21-84	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional)			2425.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Vickie Travis 2225 Edinborough Drive Murray, KY 42071	self	09-30-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Waddell Hancock Claiborne Farm Paris, KY 40361	Clairborne Farm	08-23-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Thoroughbred Breeder	Aggregate Year-to-Date-\$	700.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Raymond E. Veal 3205 Hobcaw Lane Lexington, KY 40502	self	09-06-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation realtor	Aggregate Year-to-Date-\$	1000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Joanna L. Carter 364 Secretariat Trail Corbin, KY 40701	self	08-29-84	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	350.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Henderson Hawkins P. O. Box G Elkhorn City, KY 41522	Information Requested	09-20-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	330.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Shirley W. Palmer-Ball P. O. Box 7155 Louisville, KY 40207	Self/Palmer Products	09-27-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/Owner	Aggregate Year-to-Date-\$	300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Henry J. Werronen 11 Zorn Place Louisville, KY 40206	Humana Inc.	09-28-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec.	Aggregate Year-to-Date-\$	500.00
SUBTOTAL of Receipts This Page (optional)			3150.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Mrs. Ruby Coleman Box 2009 Pikeville, KY 41501		Self employed	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 09-28-84	
		Occupation Homemaker	
		Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. John G. Heyburn, II 55 Hill Road Louisville, KY 40204		Brown, Todd & Heyburn	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 09-19-84	
		Occupation Lawyer	
		Aggregate Year-to-Date-\$ 300.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Dr. W. V. Pierce 822 North Ft. Thomas Avenue Fort Thomas, KY 41075		none	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 09-24-84	
		Occupation retired physician	
		Aggregate Year-to-Date-\$ 210.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Ms. Bernice McI. Wintersteen 100 Grays Lane Haverford, PA 19041		none	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 07-26-84	
		Occupation retired	
		Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Ms. Margaret A. Curvin Transgulf Municipal Securities 80 Broad Street New York, NY 10004		Transgulf Municipal Securities	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 07-26-84	
		Occupation Executive Vice President	
		Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Alpha Hutchinson 235 Knapp Avenue Morehead, KY 40351		Citizens Bank	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08-24-84	
		Occupation President	
		Aggregate Year-to-Date-\$ 2000.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Dr. Ralph M. Denham 1610 Dundee Way Louisville, KY 40205		Self employed	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 09-17-84	
		Occupation Doctor	
		Aggregate Year-to-Date-\$ 325.00	
SUBTOTAL of Receipts This Page (optional)			2780.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Albert S. Kellow
 1603 Avenue Plaza

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-06-84

Amount of Each
 Receipt this Period

100.00

Occupation

retired

Aggregate Year-to-Date—\$ 450.00

B. Full Name, Mailing Address and ZIP Code

Mr. William E. Rueff
 Box 40

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

07-25-84

Amount of Each
 Receipt This Period

10.00

Occupation

Attorney

Aggregate Year-to-Date—\$ 210.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harkness Edwards, Jr.
 1620 Traveller Rd

Lexington, KY 40504

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

retired

Date (month,
 day, year)

07-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

stockbroker

Aggregate Year-to-Date—\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Madeline LaCroix
 1700 Park Shore Road

La Grange, KY 40031

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

09-18-84

Amount of Each
 Receipt This Period

800.00

Occupation

homemaker

Aggregate Year-to-Date—\$ 800.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Vicki C. Sistrunk
 4018 Deer Lake Cr.

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jefferson County Gov.

Date (month,
 day, year)

08-03-84

Amount of Each
 Receipt This Period

2.00

Occupation

Executive Secretary

Aggregate Year-to-Date—\$ 257.00

F. Full Name, Mailing Address and ZIP Code

Honorable James E. Bailey
 Rt. 1

Box 257

Russellville, KY 42276

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Logan County

Date (month,
 day, year)

08-13-84

Amount of Each
 Receipt This Period

370.00

Occupation

County Judge

Aggregate Year-to-Date—\$ 570.00

G. Full Name, Mailing Address and ZIP Code

Mr. Harry Lewman
 125 Chenoweth Lane, Suite 300

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Harry Lewman Co.

Date (month,
 day, year)

09-26-84

Amount of Each
 Receipt This Period

970.00

Occupation

Realtor

Aggregate Year-to-Date—\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

3252.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. and Mrs. Jack P. Spradlin 6903 Wythe Hill Circle Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lincoln Federal/Self Occupation President/Homemaker Aggregate Year-to-Date—\$ 225.00	Date (month, day, year) 09-18-84	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and ZIP Code Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation Attorney Aggregate Year-to-Date—\$ 1900.00	Date (month, day, year) 09-04-84	Amount of Each Receipt This Period 800.00
C. Full Name, Mailing Address and ZIP Code Mr. Stuart J. Frankenthal 5540 Forest Lake Dr. Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Barnett & Alagia Occupation Attorney Aggregate Year-to-Date—\$ 250.00	Date (month, day, year) 09-18-84	Amount of Each Receipt This Period 250.00
D. Full Name, Mailing Address and ZIP Code Ms. Clara H. Stradley 417 King's Highway Milford, DE 19963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation Housewife Aggregate Year-to-Date—\$ 1000.00	Date (month, day, year) 07-13-84	Amount of Each Receipt This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Mr. F. Newell Bohnett 44-600 Kaneohe Bay Drive Kaneohe, HI 96744 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self employed Occupation Rancher Aggregate Year-to-Date—\$ 250.00	Date (month, day, year) 08-09-84	Amount of Each Receipt This Period 250.00
F. Full Name, Mailing Address and ZIP Code Mr. George A. Grace 25 Holly Woods, Apt. B Ft. Thomas, KY 41075 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Electrotype Deluxe Engraving Co. Occupation Supervisor Aggregate Year-to-Date—\$ 275.00	Date (month, day, year) 07-17-84	Amount of Each Receipt This Period 50.00
G. Full Name, Mailing Address and ZIP Code Ms. Carolena Mayer Route 4, James Lane Versailles, KY 40383 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation horseowner Aggregate Year-to-Date—\$ 500.00	Date (month, day, year) 09-17-84	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional)			2950.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Hattie W. Thompson
1124 Myra Barnes Ave.

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-17-84

Amount of Each
Receipt this Period

100.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 600.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Zana R. Brimm
3225 Rosewedge Way

Louisville, KY 40216

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-17-84

Amount of Each
Receipt This Period

73.00

Occupation

Retired

Aggregate Year-to-Date-\$ 256.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Margaret K. Miller
1222 Manitau Avenue

Louisville, KY 40215

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Fred Tuck
Route 4, Box 95

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-25-84

Amount of Each
Receipt This Period

5.00

Occupation

retired

Aggregate Year-to-Date-\$ 1215.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Waddell W. Hancock
Claiborne Farm

Paris, KY 40361

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

08-23-84

Amount of Each
Receipt This Period

500.00

Occupation

thoroughbred breeder

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Raymond E. Veal
3205 Hobcaw Ln

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Joanna L. Carter
364 Secretariat Trail

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-18-84

Amount of Each
Receipt This Period

200.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 350.00

SUBTOTAL of Receipts This Page (optional)

2378.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Charles R. Hayes
1850 Bonniecastle Dr.

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-26-84

Amount of Each
Receipt this Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 350.00

B. Full Name, Mailing Address and ZIP Code

Mr. James R. Parks
Rt. 1

Webster, KY 40176

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. William E Whaley, Jr.
503 Rolling Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. George Hunt Collins
14 Overbrook Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

09-26-84

Amount of Each
Receipt This Period

400.00

Occupation

President/Owner

Aggregate Year-to-Date-\$ 600.00

E. Full Name, Mailing Address and ZIP Code

Mr. Kenneth L. Hirsch
2107 Camargo Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Paramount Foods

Date (month,
day, year)

07-10-84

Amount of Each
Receipt This Period

250.00

Occupation

V.P.-Administrator

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Joseph B. Woodlief
331 Zorn Ave., #5

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Glenmore Distilleries Co.

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

100.00

Occupation

Executive

Aggregate Year-to-Date-\$ 400.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Patricia Dabney
399 1/2 Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-05-84

Amount of Each
Receipt This Period

800.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1100.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Mr. David A. Jones P.O. Box 1438 Louisville, KY 40201		Humana	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive Aggregate Year-to-Date-\$ 2000.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Leonidas D. Deters, Jr. 7001 US Highway 42 Louisville, KY 40222		self	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Philip J. Kendall President, Packard Press 10th & Spring Garden Streets Philadelphia, PA 19123		Packard Press	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. William E. Rueff Box 40 Morgantown, KY 42261		self employed	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney Aggregate Year-to-Date-\$ 210.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Bruce Anderson 1008 South Broadway Lexington, KY 40504		Anderson Oil & Gas Properties	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Oil & Gas Developer Aggregate Year-to-Date-\$ 500.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Harkness Edwards, III 130 Jones Nursery Road Lexington, KY 40511		self	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation real estate developer Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Jerry Lamb Indiana Tube Corporation 2100 Lexington Avenue Evansville, IN 47712		Indiana Tube Corp.	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation businessman Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			4850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Arthur K. Smith 1010 Alta Circle Road Louisville, KY 40205	Smith Furniture	09-18-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date-\$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Honorable James E. Bailey Rt. 1 Box 257 Russellville, KY 42276	Logan County	09-21-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Judge Aggregate Year-to-Date-\$ 570.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240	none	08-23-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date-\$ 333.97		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Jack C. Blackstone, Jr. 4119 Fox Run Lane Owensboro, KY 42301	self	09-13-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation physician Aggregate Year-to-Date-\$ 250.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert C. Gatewood 268 St. Matthews Avenue Louisville, KY 40207	Druther's International Inc.	08-08-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman Aggregate Year-to-Date-\$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John A. Manfuso, Jr. 8401 Connecticut Avenue Chevy Chase, MD 20815	Manfuso Brothers	07-20-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation executive Aggregate Year-to-Date-\$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Craig D. Sutherland 4000 Main Street Kansas City, MO 64111	self employed	07-24-84	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lumber Business Aggregate Year-to-Date-\$ 750.00		
SUBTOTAL of Receipts This Page (optional)			2850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Hilary J. Boone
 Wimbledon Farm
 1725 Walnut Hill Road
 Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wimbledon Farm

Date (month,
day, year)

08-30-84

Amount of Each
Receipt this Period

1000.00

Occupation

Horse Breeder

Aggregate Year-to-Date—\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. George A. Grace
 25 Holly Woods, Apt. B

Ft. Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Electrotype Deluxe Engraving Co.

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

25.00

Occupation

Supervisor

Aggregate Year-to-Date—\$ 275.00

C. Full Name, Mailing Address and ZIP Code

Dr. E. Truman Mays
 801 Leaf Lane

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

100.00

Occupation

Surgeon

Aggregate Year-to-Date—\$ 600.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Hattie W. Thompson
 1124 Myra Barnes Ave.

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

400.00

Occupation

Homemaker

Aggregate Year-to-Date—\$ 600.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Zana R. Brimm
 3225 Rosewedge Way

Louisville, KY 40216

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date—\$ 256.00

F. Full Name, Mailing Address and ZIP Code

Mr. Charles Hagan
 755 Chinoe Rd.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

40.00

Occupation

Retired

Aggregate Year-to-Date—\$ 270.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Robert L. Mitchell
 217 Hamlin St.

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

400.00

Occupation

homemaker

Aggregate Year-to-Date—\$ 400.00

SUBTOTAL of Receipts This Page (optional)

1995.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Fred Tuck
Route 4, Box 95

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$ 1215.00

Date (month,
day, year)

07-25-84

Amount of Each
Receipt this Period

10.00

B. Full Name, Mailing Address and ZIP Code

Dr. E. Dean Canan
Old Louisville Road

Spisherville, KY 40023

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self Employed

Occupation

General Surgeon

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. James E. Hardy
340 E. Main Street

Louisville, KY 40202

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brinley-Hardy Co.

Occupation

President

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

08-29-84

Amount of Each
Receipt This Period

300.00

D. Full Name, Mailing Address and ZIP Code

Mr. Frederick G. Neikirk
304 College Street

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self employed

Occupation

Attorney

Aggregate Year-to-Date-\$ 350.00

Date (month,
day, year)

08-20-84

Amount of Each
Receipt This Period

100.00

E. Full Name, Mailing Address and ZIP Code

Dr. Tim Lee Carter
701 N. Main Street

Tompkinsville, KY 42167

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$ 515.00

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Alvin S. Haynes, Jr.
2490 Tulsa Road

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Alvin Hayes Trucking Co.

Occupation

businessman

Aggregate Year-to-Date-\$ 500.00

Date (month,
day, year)

07-18-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Ronald R. Parry
600 Greenup St.

P. O. Box 472

Covington, KY 41011

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Robinson, Arnzen, Parry & Wentz

Occupation

Attorney

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

08-17-84

Amount of Each
Receipt This Period

500.00

SUBTOTAL of Receipts This Page (optional)

2160.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Beverly C. Wheatley
343 Kenwood Hill Rd.

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-21-84

Amount of Each
Receipt this Period

100.00

Occupation

Campaign Worker

Aggregate Year-to-Date-\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Leslie Combs, II

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

1000.00

Occupation

horsebreeder

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Maynard Hogg
Box 536

Neon, KY 41840

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

08-30-84

Amount of Each
Receipt This Period

500.00

Occupation

Oil Producer

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Donald G. Powell
P. O. Box 82

Providence, KY 42450

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Powell Enterprises

Date (month,
day, year)

08-13-84

Amount of Each
Receipt This Period

500.00

Occupation

Executive

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert L. Woolery, II
3643 Old Orchard Drive

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-04-84

Amount of Each
Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$ 600.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard A. Dahlem
604 Briar Hill Rd.

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dahlem Construction Co

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

500.00

Occupation

Construction

Aggregate Year-to-Date-\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mr. Lawrence L. Jones, III
2116 River Bluff Rd

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wyatt, Tarrant & Combs

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

974.70

Occupation

Attorney

Aggregate Year-to-Date-\$ 974.70

SUBTOTAL of Receipts This Page (optional)

4074.70

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Duane R. Roberts
P. O. Box 2447

Riverside, CA 92516

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

D. R. R. Investments

Date (month,
day, year)

08-27-84

Amount of Each
Receipt this Period

500.00

Occupation

Investments

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. William L. Dommerich
359 Deer Hollow

Napa, CA 94558

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. John H. Kerr, Jr.
124 South Ashland

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Kerr Brothers Funeral Home

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

7.50

Occupation

Funeral Director

Aggregate Year-to-Date-\$ 557.50

D. Full Name, Mailing Address and ZIP Code

Mr. William E. Rueff
Box 40

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

07-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 210.00

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

857.50

TOTAL This Period (last page this line number only)

149530.17

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

McCreary Co. Rep. Executive Com.
 Box 217

Whitley City, KY 42653

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

09-04-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

B. Full Name, Mailing Address and ZIP Code

Meade County Republican Comm.
 1361 Old St. Road

Brandenburg, KY 40108

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-12-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

C. Full Name, Mailing Address and ZIP Code

Oldham CO. Rep. Women's Club
 c/o Mrs. Donald Rice
 1500 Halls Hill Road
 Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

D. Full Name, Mailing Address and ZIP Code

Fayette Co. Rep. Women's Club
 110 South Hanover Avenue

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-10-84

400.00

Occupation

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Allen Co. Rep. Women's Club
 Route 6, Box 65

Scottsville, KY 42164

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-13-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

F. Full Name, Mailing Address and ZIP Code

Good Ole Boys
 of the Grand Old Party

Danville, KY 40422

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-06-84

999.00

Occupation

Aggregate Year-to-Date-\$

999.00

G. Full Name, Mailing Address and ZIP Code

Nat. Republican Senatorial Com.
 404 C. Street, N.E.

Washington, DC 20002

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

144.32

Occupation

In-Kind

Reception #2

Aggregate Year-to-Date-\$

2249.96

SUBTOTAL of Receipts This Page (optional)

1943.32

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Rep. County Judges Assoc. of KY
 160 Juniper Drive

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

09-26-84

626.77

Occupation

Aggregate Year-to-Date—\$

626.77

B. Full Name, Mailing Address and ZIP Code

Madison Co. Womens Rep. Club
 Route 6, Box 301

Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-27-84

100.00

Occupation

Aggregate Year-to-Date—\$

100.00

C. Full Name, Mailing Address and ZIP Code

Portland Republican Club
 2915 Portland Avenue

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-13-84

500.00

Occupation

Aggregate Year-to-Date—\$

500.00

D. Full Name, Mailing Address and ZIP Code

Republican Party of McCreary Co.

Whitley City, KY 42653

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-04-84

50.00

Occupation

Aggregate Year-to-Date—\$

50.00

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

1276.77

TOTAL This Period (last page this line number only)

3220.09

SCHEDULE A

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Non Partisan Political Sup.Com.
 Mr. James Hindenach, Treasurer
 General Electric Company
 Fairfield, CT 06431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

07-24-84

1500.00

Occupation

Aggregate Year-to-Date-\$ 1550.00

B. Full Name, Mailing Address and ZIP Code

Whirlpool PAC
 2000 U. S. 33 North

Benton Harbor, MI 49022
 Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-27-84

300.00

Occupation

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Borg-Warner PAC
 200 S. Michigan

Chicago, IL 60604
 Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-16-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Tower Senate Club (PAC)
 P. O. Box 794

Austin, TX 78767
 Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-29-84

1000.00

Occupation

Aggregate Year-to-Date-\$ -2000.00

E. Full Name, Mailing Address and ZIP Code

Wagner Castings Company PAC
 P. O. Box 1319

Decatur, IL 62525
 Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-27-84

100.00

Occupation

Aggregate Year-to-Date-\$ 100.00

F. Full Name, Mailing Address and ZIP Code

ESI-PAC
 Mr. T. R. Armstrong, Chairman
 P. O. Box 1359
 Richardson, TX 75080

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-30-84

750.00

Occupation

Aggregate Year-to-Date-\$ 1050.00

G. Full Name, Mailing Address and ZIP Code

Lone Star Steel PAC
 Mr. John M. Morris, Chairman
 P. O. Box 35888
 Dallas, TX 75235

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-25-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1500.00

SUBTOTAL of Receipts This Page (optional)

5650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 4 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Tower Senate Club (PAC)
 P. O. Box 794

Austin, TX 78767

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

09-28-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Brunswick Good Government Fund
 One Brunswick Plaza

Skokie, IL 60077

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-16-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Eaton Public Policy Association
 100 Erieview Plaza

Cleveland, OH 44114

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-24-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Assoc of Amer. Phys & Surg. PAC
 Mr. Charles Ord
 5201-B Lyngate Court
 Burke, VA 22015

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

2360.00

Occupation

Aggregate Year-to-Date-\$ -7360.00

In-Kind
 Mailing List - Names

E. Full Name, Mailing Address and ZIP Code

Motorola Emp. Good Govt. Fund
 1776 K Street, N. W.

Washington, DC 20006

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-04-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Assoc. Builders & Contractors PAC
 1806 South Third Street

Louisville, KY 40208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-07-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Tenneco Employees Good Govt. Fund
 P. O. Box 2511
 Houston, TX 77001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-17-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1500.00

SUBTOTAL of Receipts This Page (optional)

7860.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 4 for
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 category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

American Metal Stamping Assc.PAC
 27027 Chardon Road

Richmond Heights, OH 44143

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-30-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

BI PAR PAC
 P. O. Box 278

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-10-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1892.70

C. Full Name, Mailing Address and ZIP Code

CLARKPAC
 C/O Clark Equipment Company
 Circle Drive
 Buchanan, MI 40324

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-06-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

D. Full Name, Mailing Address and ZIP Code

American Standard, Inc.
 Good Government Fund
 40 West 40th Street
 Louisville, KY 40202

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-06-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Biggie International Employees
 Better Government Committee
 1000 Virginia Center Parkway
 Richmond, VA 23295

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-06-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

HUMPAC
 P. O. Box 1438

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-20-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Campaign America
 919 Prince Street

Alexandria, VA 22314

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 4 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

National Economic and PAC
P. O. Box 1186

Columbus, GA 31902

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-06-84

100.00

Occupation

Aggregate Year-to-Date—\$

100.00

B. Full Name, Mailing Address and ZIP Code

First KY National Corp. PAC
P. O. Box 36000

Louisville, KY 40233

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-28-84

3000.00

Occupation

Aggregate Year-to-Date—\$

4000.00

C. Full Name, Mailing Address and ZIP Code

W & M Securities Inc. PAC
14 Wall Street

New York, NY 10005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-10-84

2000.00

Occupation

Aggregate Year-to-Date—\$

2000.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

28110.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 5
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
 DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-02-84

1516.14

Occupation

Aggregate Year-to-Date--\$ 11204.35

B. Full Name, Mailing Address and ZIP Code

Liberty National Bank
 DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-05-84

1367.87

Occupation

Aggregate Year-to-Date--\$ 11204.35

C. Full Name, Mailing Address and ZIP Code

Liberty National Bank
 DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-03-84

1262.49

Occupation

Aggregate Year-to-Date--\$ 11204.35

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date--\$

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date--\$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date--\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date--\$

SUBTOTAL of Receipts This Page (optional)

4146.50

TOTAL This Period (last page this line number only)

4146.50

84020171033

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Delta Temporary, Inc 224B Executive Park Louisville, KY 40207	Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-22-84	103.80
B. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	1127.70
C. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-11-84	6500.00
D. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	43.37
E. Full Name, Mailing Address and ZIP Code Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-10-84	75.38
F. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	108.53
G. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	284.48
H. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	338.21
I. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	92.27
SUBTOTAL of Disbursements This Page (optional)			8673.74
TOTAL This Period (last page this line number only)			

84020191084

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
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McConnell Senate Committee

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Name of Committee (in Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	149.80
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-11-84	25000.00
Mr. Don Triplett 3317 Oleanda Louisville, KY 40215	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	120.60
Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-24-84	120.60
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	514.17
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-11-84	300.00
John Conti Company P.O. Box 18289 Louisville, KY 40218	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-06-84	62.00
K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	3442.50
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-18-84	1000.00
SUBTOTAL of Disbursements This Page (optional)			30709.67
TOTAL This Period (last page this line number only)			

84020191035

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

Page 3 of 3

Page _____ of _____ for
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	103.20
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-07-84	11.03
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-18-84	100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-17-84	148.91
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-07-84	4056.83
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-03-84	1370.39
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	250.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Columbia Press, Inc. P. O. Box 346 Columus, IN 47202	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	2327.65
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	790.42
SUBTOTAL of Disbursements This Page (optional)			9158.43
TOTAL This Period (last page this line number only)			

84020191086

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-13-84	Amount of Each Disbursement This Period 449.88
B. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 1061.69
C. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 1127.70
D. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-25-84	Amount of Each Disbursement This Period 364.66
E. Full Name, Mailing Address and ZIP Code Delta Temporary, Inc 224B Executive Park Louisville, KY 40207	Purpose of Disbursement Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 115.00
F. Full Name, Mailing Address and ZIP Code State Farm Insurance 760 N.W. Broad Street Murfreesboro, TN 37131	Purpose of Disbursement Insurance Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-03-84	Amount of Each Disbursement This Period 133.43
G. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-21-84	Amount of Each Disbursement This Period 5141.00
H. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-17-84	Amount of Each Disbursement This Period 143.85
I. Full Name, Mailing Address and ZIP Code Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-24-84	Amount of Each Disbursement This Period 91.35
SUBTOTAL of Disbursements This Page (optional)			8628.56
TOTAL This Period (last page this line number only)			

84020191087

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-15-84	Amount of Each Disbursement This Period 108.53
B. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-28-84	Amount of Each Disbursement This Period 142.24
C. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 10.00
D. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-18-84	Amount of Each Disbursement This Period 40000.00
E. Full Name, Mailing Address and ZIP Code Mr. Don Triplett 3317 Oleanda Louisville, KY 40215	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-13-84	Amount of Each Disbursement This Period 115.58
F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-12-84	Amount of Each Disbursement This Period 157.54
G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-13-84	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code John Conti Company P.O. Box 18289 Louisville, KY 40218	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 31.00
I. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-12-84	Amount of Each Disbursement This Period 1031.00
SUBTOTAL of Disbursements This Page (optional)			41895.89
TOTAL This Period (last page this line number only)			

SCHEDULE B

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year) 08-28-84	Amount of Each Disbursement This Period 200.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement	Date (month, day, year) 08-03-84	Amount of Each Disbursement This Period 131.27
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary	Date (month, day, year) 08-15-84	Amount of Each Disbursement This Period 97.69
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220	Purpose of Disbursement Contract Labor	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 94.64
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year) 08-16-84	Amount of Each Disbursement This Period 200.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Salary	Date (month, day, year) 09-28-84	Amount of Each Disbursement This Period 103.20
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Mr. Greg Lundberg 2724 Riedling Road Louisville, KY 40206	Purpose of Disbursement Contract Labor	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 58.63
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones	Date (month, day, year) 07-17-84	Amount of Each Disbursement This Period 985.25
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Purpose of Disbursement Contract Labor	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			2370.68
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cincinnati Bell Atrium 1 Building East 4th Street Cincinnati, OH 45202	Phone Installation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-17-84	350.00
B. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	790.42
C. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	9.73
D. Full Name, Mailing Address and ZIP Code Xerox 1250 Fairwood Ave. Columbus, OH 43267	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	337.47
E. Full Name, Mailing Address and ZIP Code Casey Co. Board of Education Liberty, KY 42539	Transportation Expenses for Band Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-19-84	252.00
F. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	1061.69
G. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	135.00
H. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	378.00
I. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-03-84	5800.00
SUBTOTAL of Disbursements This Page (optional)			9114.31
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Express Press 4400 Bishop Lane Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-25-84	133.40
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Horizon 1214 S. Sixth Street Louisville, KY 40203	Music Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-19-84	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	108.53
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-28-84	34.40
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-24-84	40200.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Don Triplett 3317 Oleanda Louisville, KY 40215	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-27-84	70.35
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-13-84	514.17
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-23-84	200.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Conti Company P.O. Box 18289 Louisville, KY 40218	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-05-84	31.00
SUBTOTAL of Disbursements This Page (optional)			41791.85
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc Frankfort, KY 40601	Purpose of Disbursement Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-25-84	Amount of Each Disbursement This Period 187.40
B. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 124.79
C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-28-84	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-08-84	Amount of Each Disbursement This Period 111.02
E. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-30-84	Amount of Each Disbursement This Period 97.69
F. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-13-84	Amount of Each Disbursement This Period 102.18
G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-10-84	Amount of Each Disbursement This Period 200.00
H. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Pkwy. Jeffersontown, KY 40299	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-06-84	Amount of Each Disbursement This Period 570.39
I. Full Name, Mailing Address and ZIP Code Mr. Greg Lundberg 2727 Riedling Road Louisville, KY 40206	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 8-13-84	Amount of Each Disbursement This Period 92.96
SUBTOTAL of Disbursements This Page (optional)			1686.43
TOTAL - This Page (last page this line number only)			Contract Labor

84020191092

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Memphis Senate Committ

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	1369.09
Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-19-84	33.12
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	790.42
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-26-84	459.61
Xerox 1250 Fairwood Ave. Columbus, OH 43267	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	337.47
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-13-84	187.53
AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-06-84	441.34
Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	5800.00
Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	30.00
SUBTOTAL of Disbursements This Page (optional)			9448.58
TOTAL This Period (last page this line number only)			

3
9
0
1
6
1
0
2
0
2
0
8

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Name of Committee (in Full)

~~McConnell Senate Committee~~

A. Full Name, Mailing Address and ZIP Code

Office Products Clearance Center
 P.O. Box 1679

Purpose of Disbursement

Office Furniture

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

08-06-84

Amount of Each
 Disbursement This Period

571.72

~~Louisville, KY 40201~~

B. Full Name, Mailing Address and ZIP Code

Ms. Susan Ballard
 3629 Fountain Drive, Apt 3

Purpose of Disbursement

Petty Cash

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

09-12-84

Amount of Each
 Disbursement This Period

50.00

~~Louisville, KY 40218~~

C. Full Name, Mailing Address and ZIP Code

~~Bisney Bowes Credit Corporation~~
~~P.O. Box 38466~~
 Louisville, KY 40233

Purpose of Disbursement

Office Equipment

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

08-03-84

Amount of Each
 Disbursement This Period

695.94

D. Full Name, Mailing Address and ZIP Code

Mr. Jack Telle
 2215 Talbott Ave.

Purpose of Disbursement

Travel Reimbursement

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

08-28-84

Amount of Each
 Disbursement This Period

10.00

Louisville, KY 40205

E. Full Name, Mailing Address and ZIP Code

Ms. Mary Gabriel Harpring
 3610 Glencreek Lane

Purpose of Disbursement

Salary

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

07-13-84

Amount of Each
 Disbursement This Period

275.38

Louisville, KY 40218

F. Full Name, Mailing Address and ZIP Code

Ms. Sharon Pierce
 5609 Oxford, Apt 847

Purpose of Disbursement

Salary

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

07-13-84

Amount of Each
 Disbursement This Period

502.16

Louisville, KY 40291

G. Full Name, Mailing Address and ZIP Code

Mr. Don Triplett
 3317 Oleanda

Purpose of Disbursement

Contract Labor

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

09-10-84

Amount of Each
 Disbursement This Period

58.63

Louisville, KY 40215

H. Full Name, Mailing Address and ZIP Code

Commercial Office Suppliers, Inc.
 433 East Market Street

Purpose of Disbursement

Office Supplies

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

07-25-84

Amount of Each
 Disbursement This Period

59.37

Louisville, KY 40202

I. Full Name, Mailing Address and ZIP Code

Ms. Sharon Pierce
 5609 Oxford, Apt 847

Purpose of Disbursement

Salary

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

09-28-84

Amount of Each
 Disbursement This Period

514.17

Louisville, KY 40291

SUBTOTAL of Disbursements This Page (optional)

2737.37

TOTAL This Period (last page this line number only)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code U.S. Postmaster	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	500.00
Louisville, KY 40201			
B. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street	Purpose of Disbursement Computer Services	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-06-84	300.00
Jacksonville, FL 32202			
C. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc 332 Capitol Ave.	Purpose of Disbursement Clipping Service	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	74.18
Frankfort, KY 40601			
D. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-13-84	95.48
Louisville, KY 40291			
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-07-84	300.00
Louisville, KY 40201			
F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	103.20
Louisville, KY 40218			
G. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	97.69
Louisville, KY 40205			
H. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-27-84	117.25
Louisville, KY 40220			
I. Full Name, Mailing Address and ZIP Code U.S. Postmaster	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	200.00
Louisville, KY 40201			
SUBTOTAL of Disbursements This Page (optional)			1787.80
TOTAL This Period (last page this line number only)			

8402019109

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Printing and Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	113.57
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Greg Lundberg 2724 Riedling Road Louisville, KY 40206	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-27-84	100.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	961.47
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-24-84	2.25
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	790.42
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	459.61
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	92.96
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	1127.70
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-17-84	416.00
SUSTOTAL of Disbursements This Page (optional)			4064.48
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-05-84	5800.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Delivery Charges		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	25.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Office Furniture		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-05-84	285.86
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	108.53
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233	Office Equipment		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	347.97
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	92.27
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	275.38
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	12.01
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Don Triplett 3317 Oleanda Louisville, KY 40215	Contract Labor		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-24-84	70.38
SUBTOTAL of Disbursements This Page (optional)			7017.40
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc	Office Supplies	07-25-84	66.52
433 East Market Street	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Louisville, KY 40202	<input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Palm Beach Plaza Center Assos.	Rent	07-23-84	2024.69
1941 Bishop Lane, Suite 406	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Louisville, KY 40218	<input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster	Postage	07-25-84	500.00
Louisville, KY 40201	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cybernetics & Systems, Inc.	Computer Time	09-05-84	350.00
500 Water Street	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Jacksonville, FL 32202	<input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kentucky Press Service, Inc	Clipping Service	08-06-84	112.36
332 Capitol Ave.	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Frankfort, KY 40601	<input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Debbie Ratliff	Contract Labor	08-27-84	108.88
8611 Attu Lane	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Louisville, KY 40291	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster	Postage	09-07-84	300.00
Louisville, KY 40201	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack	Travel Reimbursement	08-16-84	140.32
3201 Leith Lane	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Apartment 715	<input type="checkbox"/> Other (specify):		
Louisville, KY 40218			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds	Expense Reimbursement	09-19-84	200.00
2326 Broadmeade Road	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Louisville, KY 40205	<input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			3802.77
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-10-84	Amount of Each Disbursement This Period 82.08
B. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-06-84	Amount of Each Disbursement This Period 106.76
C. Full Name, Mailing Address and ZIP Code Lexington Center Corporation 430 W. Vine Street Lexington, KY 40507	Purpose of Disbursement Room Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-05-84	Amount of Each Disbursement This Period 400.00
D. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 71.85
E. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-28-84	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-25-84	Amount of Each Disbursement This Period 12.50
G. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-30-84	Amount of Each Disbursement This Period 459.61
H. Full Name, Mailing Address and ZIP Code Datapoint Corporation P.O. Box 93192 Chicago, IL 60673	Purpose of Disbursement Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-03-84	Amount of Each Disbursement This Period 5808.13
I. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-13-84	Amount of Each Disbursement This Period 94.64
SUBTOTAL of Disbursements This Page (optional)			7535.57
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell State Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road	Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	08-28-84	168.91
BOH, Louisville, KY 40220	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.B.C. Printing 3520 College Drive	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	2257.50
Louisville, KY 40299	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-07-84	312.85
Express Press 4400 Bishop Lane			
Louisville, KY 40218	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Transportation Costs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-12-84	3442.46
Morgan Equipment Company P.O. Box 7802			
San Francisco, CA 94120	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Studip Taping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	633.50
Allen-Martin Video Productions 9701 Taylorsville Road			
Jeffersonton, KY 40299	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Airplane Tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	978.00
Faversham World Travel 2843 Brownsboro Road			
Louisville, KY 40206	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-02-84	42.35
Mr. Bill Oakley Apt. 16, Vieux Carre Apts.			
Louisville, KY 40222	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	108.53
Ms. Susan Ballard 3629 Fountain Drive, Apt 3			
Louisville, KY 40218	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	347.97
Pitney Bowes Credit Corporation P.O. Box 38460			
Louisville, KY 40233			
SUBTOTAL of Disbursements This Page (optional)			8292.07
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

A. Full Name, Mailing Address and ZIP Code McConnell Senate Committee Mr. Jack Telle 2215 Talbott Ave.	Purpose of Disbursement Salary	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 92.27	
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): XX			
B. Full Name, Mailing Address and ZIP Code IPG Full Service Agency Ms. Mary Gabriel Harpring 3610 Glencreek Lane	Purpose of Disbursement Salary	Date (month, day, year) 08-16-84	Amount of Each Disbursement This Period 183.59	
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): XX			
C. Full Name, Mailing Address and ZIP Code IPG Full Service Agency Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Petty Cash	Date (month, day, year) 07-25-84	Amount of Each Disbursement This Period 221.74	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202	Purpose of Disbursement Office Supplies	Date (month, day, year) 07-25-84	Amount of Each Disbursement This Period 43.22	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Purpose of Disbursement Rent	Date (month, day, year) 08-16-84	Amount of Each Disbursement This Period 2024.69	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year) 08-06-84	Amount of Each Disbursement This Period 200.00	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement	Date (month, day, year) 07-10-84	Amount of Each Disbursement This Period 76.19	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
H. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601	Purpose of Disbursement Clipping Service	Date (month, day, year) 09-05-84	Amount of Each Disbursement This Period 97.37	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
I. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Purpose of Disbursement Contract Labor	Date (month, day, year) 09-10-84	Amount of Each Disbursement This Period 85.43	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Disbursements This Page (optional)			3024.50	
TOTAL This Period (last page this line number only)				

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Name of Committee (in Full)			
McConnell Senat ommittee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster	Postage		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-12-84	500.00
Louisville, KY 40201			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack	Travel Reimbursement		
3201 Leith Lane	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-24-84	87.50
Apartment 715-			
Louisville, KY 40218			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds	Salary		
2326 Broadmeade Road	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	97.69
Louisville, KY 40205			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Paul Reid	Contract Labor		
107 Finley	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-25-84	117.26
Apartment P-5			
Louisville, KY 40220			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Copy Shop	Printing		
1941 Bishop Lane	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	20.90
Suite 106			
Louisville, KY 40218			
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lexington Center Corporation	Room Rental		
430 W. Vine Street	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	500.00
Lexington, KY 40507			
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell	Phones		
P.O. Box 32440	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-31-84	1764.80
Louisville, KY 40232			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Terry Wallingford	Contract Labor		
3574 Tealiling C	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-10-84	100.50
Cincinnati, OH 45211			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Mary Ann H. H. H. H.	Contract Labor		
1249 Everett Ave.	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	1061.69
Louisville, KY 40204			
SUBTOTAL of Disbursements This Page (optional)			4250.34
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 459.61
B. Full Name, Mailing Address and ZIP Code Datapoint Corporation P.O. Box 93192 Chicago, IL 60673	Purpose of Disbursement Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-17-84	Amount of Each Disbursement This Period 191.53
C. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-27-84	Amount of Each Disbursement This Period 117.25
D. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-30-84	Amount of Each Disbursement This Period 1127.70
E. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 220.50
F. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-07-84	Amount of Each Disbursement This Period 51.40
G. Full Name, Mailing Address and ZIP Code Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299	Purpose of Disbursement Recording Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-14-84	Amount of Each Disbursement This Period 25.25
H. Full Name, Mailing Address and ZIP Code Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206	Purpose of Disbursement Airplane Tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-05-84	Amount of Each Disbursement This Period 533.00
I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 301.46
SUBTOTAL of Disbursements This Page (optional)			3027.70
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40292	Dubbing Tapes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	132.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Don Garton 1044 Alta Vista Road Louisville, KY 40205	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	119.76
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	27500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	7.75
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	514.17
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-06-84	369.05
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Hyatt Corporation Lexington Center Lexington, KY 40506	Room Rental and Food Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	3010.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-12-84	2024.69
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-10-84	200.00
SUBTOTAL of Disbursements This Page (optional)			33877.92
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-10-84	Amount of Each Disbursement This Period 131.91
B. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601	Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-03-84	Amount of Each Disbursement This Period 1440.07
C. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-24-84	Amount of Each Disbursement This Period 105.57
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-18-84	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-30-84	Amount of Each Disbursement This Period 103.20
F. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Purpose of Disbursement Check Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-06-84	Amount of Each Disbursement This Period 17.10
G. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 23.63
H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-17-84	Amount of Each Disbursement This Period 986.17
I. Full Name, Mailing Address and ZIP Code Mr. Terry Wallingford 3974 Yearling Ct. Cincinnati, OH 45211	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-24-84	Amount of Each Disbursement This Period 120.60
SUBTOTAL of Disbursements This Page (optional)			3428.25
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-30-84	1061.69
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Salary		
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	459.61
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Computer Equipment		
Datapoint Corporation P.O. Box 93192 Chicago, IL 60673	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	2399.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Contract Labor		
Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-10-84	46.90
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Travel Reimbursement		
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-10-84	147.15
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Printing		
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	37.28
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Printing		
Express Press 4400 Bishop Lane Louisville, KY 40218	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-11-84	414.12
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Airplane Ticket		
Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	448.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Contract Labor		
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	79.04
SUBTOTAL of Disbursements This Page (optional)			5092.79
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
<u>McConnell Senate Committee</u>			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
V. Lance Tarrance & Associates 3845 West FM 1960, Suite 400 <u>Houston, TX 77068</u>	Research Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-13-84	12710.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Biomedical Communications Center Health Sciences Center University of Louisville <u>Louisville, KY 40292</u>	Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	53.75
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Don Garton 1044 Alta Vista Road. <u>Louisville, KY 40205</u>	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-13-84	105.53
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 <u>Indianapolis, IN 46250</u>	Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-10-84	27500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. <u>Louisville, KY 40205</u>	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-28-84	92.27
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 <u>Louisville, KY 40291</u>	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	514.17
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc. 433 East Market Street <u>Louisville, KY 40202</u>	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-21-84	321.74
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes P.O. Box 38390 <u>Louisville, KY 40233</u>	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	59.25
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster <u>Louisville, KY 40201</u>	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-10-84	200.00
SUBTOTAL of Disbursements This Page (optional)			41556.71
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	90.98
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	139.46
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-09-84	4086.62
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	212.95
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	482.26
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	757.07
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	10.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	500.00
SUBTOTAL of Disbursements This Page (optional)			6779.34
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Delta Temporary, Inc 224B Executive Park Louisville, KY 40225	Purpose of Disbursement Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	Date (month, day, year) 08-06-84	Amount of Each Disbursement This Period 117.88
B. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40220	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	Date (month, day, year) 09-24-84	Amount of Each Disbursement This Period 46.92
C. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-12-84	Amount of Each Disbursement This Period 45.35
D. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-21-84	Amount of Each Disbursement This Period 33.60
E. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-12-84	Amount of Each Disbursement This Period 86.00
F. Full Name, Mailing Address and ZIP Code Natl. Republican Senatorial Comm 404 C Street, N.E. Washington, DC 20002	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84	Amount of Each Disbursement This Period 1725.00
G. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-16-84	Amount of Each Disbursement This Period 113.79
H. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-17-84	Amount of Each Disbursement This Period 139.15
I. Full Name, Mailing Address and ZIP Code V. Lance Tarrance & Associates 3845 West FM 1960, Suite 400 Houston, TX 77068	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-05-84	Amount of Each Disbursement This Period 676.00
SUBTOTAL of Disbursements This Page (optional)			2983.69
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40202	Dubbing Tapes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	09-17-84	12.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Don Garton 1044 Alta Vista Road Louisville, KY 40205	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	08-27-84	60.30
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	09-04-84	17675.12
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	08-15-84	92.27
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	08-15-84	49.45
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	09-14-84	494.38
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes P.O. Box 38390 Louisville, KY 40233	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	09-14-84	270.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	08-16-84	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX	07-23-84	104.47
SUBTOTAL of Disbursements This Page (optional)			19257.99
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 402	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	97.69
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-25-84	200.00
C. Full Name, Mailing Address and ZIP Code 3201 Leith Lane <i>Terry Carmack</i> Apartment 715 Louisville, KY 40218	Paid and Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	103.20
D. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	289.93
E. Full Name, Mailing Address and ZIP Code Sullivan Screen Print Co., Inc. 3808 Fitzgerald Rd. Louisville, KY 40216	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-27-84	2009.04
F. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	63.70
G. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	788.98
H. Full Name, Mailing Address and ZIP Code <i>Sprint</i> Accounts Receivable Dept. Pittsburg, PA 15254	Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-06-84	691.71
I. Full Name, Mailing Address and ZIP Code <i>Ms. Gene Mullins</i> 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	1061.69
SUBTOTAL of Disbursements This Page (optional)			5305.94
TOTAL This Period (last page this line number only)			

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	627.70
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Delta Temporary, Inc 224B Executive Park Louisville, KY 40207	Temporary Help		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-13-84	100.63
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 -	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	1127.70
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	220.50
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Express Press 4400 Bishop Lane Louisville, KY 40218	Printing		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	26.72
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280	Contract Labor		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-27-84	65.33
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	108.53
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	284.48
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Travel Reimbursement		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-27-84	448.93
SUBTOTAL of Disbursements This Page (optional)			3010.52
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Salary		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-13-84	92.27
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116	Consulting Fee		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-16-84	3000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250	Media		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-07-84	11184.67
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Treasurer, Ky Unemployment Ins. Frankfort, KY 40621	Payroll Taxes		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	831.93
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503	Contract Labor		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-10-84	100.50
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Petty Cash		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-28-84	156.83
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-09-84	200.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	Office Supplies		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-18-84	81.54
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Quality Inn-Riverview Covington, KY 41000	Room rental		
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-03-84	75.00
SUBTOTAL of Disbursements This Page (optional)			15722.74
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201		Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-16-84 Amount of Each Disbursement This Period 200.00
Louisville, KY 40201 B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218		Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-27-84 Amount of Each Disbursement This Period 106.00
Louisville, KY 40218 C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 97.69
Louisville, KY 40205 D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201		Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-18-84 Amount of Each Disbursement This Period 200.00
Louisville, KY 40201 E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218		Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09-17-84 Amount of Each Disbursement This Period 82.00
Louisville, KY 40218 F. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232		Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-03-84 Amount of Each Disbursement This Period 4037.82
Louisville, KY 40232 G. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291		Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 1000.00
Louisville, KY 40291 H. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking Fund 617 West Jefferson St. Louisville, KY 40202		Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08-03-84 Amount of Each Disbursement This Period 788.07
Louisville, KY 40202 I. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 790.42
SUBTOTAL of Disbursements This Page (optional)			7302.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-05-84	780.51
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-30-84	1061.69
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	07-25-84	3.47
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Delta Temporary, Inc 224B Executive Park Louisville, KY 40207	Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	08-15-84	77.63
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-14-84	9.45
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Assoc of Amer. Phys & Surg. PAC Mr. Charles Ord 5201-B Lyngate Court Burke, VA 22015	In-Kind Mailing List - Names Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-30-84	2360.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-30-84	300.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243	In-Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-30-84	625.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nat. Republican Senatorial Com 404 C. Street, N.E. Washington, DC 20002	In-Kind Reception #2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	09-30-84	144.32
SUBTOTAL of Disbursements This Page (optional)			5362.07
TOTAL This Period (last page this line number only)			358698.10

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. John P. Blevins	Refund due to excessive contributions	08-07-84	24.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. George Huck	Refund due to Corporate Check	09-29-84	100.00
Olympias Farms	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
940 W. Washington Blvd.	<input type="checkbox"/> Other (specify):		
Los Angeles, CA 90015			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			124.00
			124.00
TOTAL This Period (last page this line number only)			

8402019116

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
LINE NUMBER ____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 20(c)

Page 1 of 1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code W & M Securities PAC 14 Wall Street New York, NY 10005	Purpose of Disbursement Refund	Date (month, day, year) 09-26-84	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			1000.00
TOTAL This Period (last page this line number only)			1000.00

84020191117

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

SECRETARY OF THE SENATE

1984 OCT 25 AM 9:53

H.D.

(Summary Page)

ALIGN AREA

ALIGN AREA

1. Name of Committee (in Full) McConnell Senate Committee	2. FEC Identification Number C00155051
Address (Number and Street) P. O. Box 1496	3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
City, State and Zip Code Louisville, KY 40201	<input type="checkbox"/> Check if address is different than previously reported.

4. TYPE OF REPORT

- | | |
|---|---|
| <input type="checkbox"/> April 15 Quarterly Report | <input checked="" type="checkbox"/> Twelfth day report preceding <u>General</u>
(Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on <u>November 6, 1984</u> in the State of <u>KY</u> |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ |
| <input type="checkbox"/> January 31 Year End Report | _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>October 1, 1984</u> through <u>October 17, 1984</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (From Line 11 (e))	159,759	824,869
(b) Total Contribution Refunds (from Line 20 (d))		1,324
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	159,759	823,545
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	215,345	1,165,444
(b) Total Offsets to Operating Expenditures (from Line 14)		579
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	215,345	1,164,865
8. Cash on Hand at Close of Reporting Period (from Line 27)	61,450	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)		
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)	17,022	

Total Receipts Since Inception \$1,482,058

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry I. Steinberg
Type or Print Name of Treasurer

Larry I. Steinberg
SIGNATURE OF TREASURER

October 23, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

84020240979

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full) McConnell Senate Committee		Report Covering the Period: From: October 1, 1984 to: October 17, 1984	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees	126,060	690,828	11 (a)
(Memo Entry Unitemized \$ <u>29,229</u>)			
(b) Political Party Committees	272	7,168	11 (b)
(c) Other Political Committees	33,427	126,873	11 (c)
(d) The Candidate			11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).	159,759	824,869	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:		25,000	13 (a)
(a) Made or Guaranteed by the Candidate			13 (b)
(b) All Other Loans		25,000	13 (c)
(c) TOTAL LOANS (add 13 (a) and 13 (b)).			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		579	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	670	12,377	15
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)	160,429	862,825	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	215,345	1,165,444	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:		25,000	19 (a)
(a) Of Loans Made or Guaranteed by the Candidate			19 (b)
(b) Of All Other Loans		25,000	19 (c)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)).			
20. REFUNDS OF CONTRIBUTIONS TO:		324	20 (a)
(a) Individuals/Persons Other Than Political Committees			20 (b)
(b) Political Party Committees		1,000	20 (c)
(c) Other Political Committees		1,324	20 (d)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))			
21. OTHER DISBURSEMENTS			21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)	215,345	1,191,768	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	116,366	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$	160,429	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$	276,795	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$	215,345	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	61,450	27

SCHEDULE D

(Revised 3/80)

DEBTS AND OBLIGATIONS Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Ailes Communications 456 West 43rd Street New York, NY 10036	5,800	26,572	32,372	
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	1,245	634	1,245	634
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	908			908
Nature of Debt (Purpose): Airplane Tickets				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
South Central Bell P. O. Box 32440 Louisville, KY 40232	1,443	2,532	1,443	2,532
Nature of Debt (Purpose): Telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	4,049			4,049
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Datapoint Corporation P. O. Box 93192 Chicago, Illinois 60673	4,798	2,399		7,197
Nature of Debt (Purpose): Computer equipment				
1) SUBTOTALS This Period This Page (optional)				\$15,320
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS (from Schedule C last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

84020240931

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207	1,160	4,969	6,129	
Nature of Debt (Purpose): Airplane rental				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299	119		59	60
Nature of Debt (Purpose): Office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	348			348
Nature of Debt (Purpose): Office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Americall Louisville 10000 Shelbyville Road Louisville, KY 40223	1,090	746	1,090	746
Nature of Debt (Purpose): Long Distance Calls				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	505	548	505	548
Nature of Debt (Purpose): Office Supplies				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116	607	89	696	
Nature of Debt (Purpose): travel reimbursement				
1) SUBTOTALS This Period This Page (optional)				\$1,702
2) TOTAL This Period (last page this line only)				\$17,022
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				

84020240903

SCHEDULE A

ITEMIZED RECEIPTS

11 (a)
Page ____ of ____ for
LINE NUMBER ____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
Indiana Senate Committee

<p>A. Full Name, Mailing Address and ZIP Code <u>Henry V. Heuser, Sr.</u> <u>1400 Willow</u> <u>Louisville, KY 40204</u></p>	<p>Name of Employer <u>Henry Vogt Machine Co.</u></p>	<p>Date (month, day, year) <u>10-16-84</u></p>	<p>Amount of Each Receipt this Period <u>500.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>President</u></p>	<p>Aggregate Year-to-Date--\$ <u>500.00</u></p>	
<p>B. Full Name, Mailing Address and ZIP Code <u>Mr. J. S. Talbott, Jr.</u> <u>1535 Lakewood Ct., West</u> <u>Lexington, KY 40502</u></p>	<p>Name of Employer <u>Information Requested</u></p>	<p>Date (month, day, year) <u>10-16-84</u></p>	<p>Amount of Each Receipt This Period <u>500.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>Information Requested</u></p>	<p>Aggregate Year-to-Date--\$ <u>550.00</u></p>	
<p>C. Full Name, Mailing Address and ZIP Code <u>Dr. Charles B. Barrett</u> <u>8221 Wolf Pen Branch Road</u> <u>Prospect, KY 40059</u></p>	<p>Name of Employer <u>self</u></p>	<p>Date (month, day, year) <u>10-17-84</u></p>	<p>Amount of Each Receipt This Period <u>1000.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>Dentist</u></p>	<p>Aggregate Year-to-Date--\$ <u>1000.00</u></p>	
<p>D. Full Name, Mailing Address and ZIP Code <u>Mr. Neil Huffman</u> <u>7501 Hunting Creek Drive</u> <u>Prospect, KY 40059</u></p>	<p>Name of Employer <u>Self Employed</u></p>	<p>Date (month, day, year) <u>10-17-84</u></p>	<p>Amount of Each Receipt This Period <u>50.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>Auto Dealer</u></p>	<p>Aggregate Year-to-Date--\$ <u>850.00</u></p>	<p>In-Kind <u>Campaign Car</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Mr. J. R. Vaughan</u> <u>333 S. Hope Street, 38th Floor</u> <u>Los Angeles, CA 90071</u></p>	<p>Name of Employer <u>Information Requested</u></p>	<p>Date (month, day, year) <u>10-17-84</u></p>	<p>Amount of Each Receipt This Period <u>250.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>Information Requested</u></p>	<p>Aggregate Year-to-Date--\$ <u>250.00</u></p>	
<p>F. Full Name, Mailing Address and ZIP Code <u>Mrs. Edna Booth</u> <u>U.S. Highway 42</u> <u>Box 213</u> <u>Union, KY 41091</u></p>	<p>Name of Employer <u>Self employed</u></p>	<p>Date (month, day, year) <u>10-08-84</u></p>	<p>Amount of Each Receipt This Period <u>100.00</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>Homemaker</u></p>	<p>Aggregate Year-to-Date--\$ <u>600.00</u></p>	
<p>G. Full Name, Mailing Address and ZIP Code <u>Mr. Jimmy A. Kincer</u> <u>15025 Bircham Road</u> <u>Louisville, KY 40243</u></p>	<p>Name of Employer <u>Copy Corporation</u></p>	<p>Date (month, day, year) <u>10-17-84</u></p>	<p>Amount of Each Receipt This Period <u>112.50</u></p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation <u>owner</u></p>	<p>Aggregate Year-to-Date--\$ <u>1612.50</u></p>	<p>In-Kind <u>Office Equipment</u></p>
<p>SUBTOTAL of Receipts This Page (optional)</p>	<p><u>2512.50</u></p>		
<p>TOTAL This Period (last page this line number only)</p>	<p></p>		

84020240983

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles F. Young
133A Mahan Avenue

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Charles Young Insurance

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

100.00

Occupation

Insurance

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Rowland D. Miller
6408 Longview Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

30.00

Occupation

Architect

Aggregate Year-to-Date-\$

230.00

C. Full Name, Mailing Address and ZIP Code

Mr. James P. Cowles
P. O. Box 2160

Spokane, WA 99203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Inland Empire Paper Company

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

100.00

Occupation

Executive

Aggregate Year-to-Date-\$

350.00

D. Full Name, Mailing Address and ZIP Code

Mr. John T. Nelson
7647 National Turnpike

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

50.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

Mr. Patrick A. Doheny
124 El Camino

Beverly Hills, CA 90212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

350.00

Occupation

investor

Aggregate Year-to-Date-\$

350.00

F. Full Name, Mailing Address and ZIP Code

Ms. Opal Ann Parrott
1109 N. Main

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Kentucky Mountain Trading Co.

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

100.00

Occupation

owner

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. Duffy L. Ford
200 South Second Street
#10

Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

250.00

Occupation

C P A

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 28 for
LINES NUMBER 11(a)
 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Anne B. Raker
 3109 Springcrest Drive**

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-10-84

Amount of Each
Receipt this Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Arthur Abba Goldberg
 83 Montgomery Street**

Jersey City, NJ 07302

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Gene Robinson
 101 Woodland Drive**

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

Retail Sales

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

**Mr. Thomas V. Handy
 105 E. 4th Street**

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

300.00

Occupation

attorney

Aggregate Year-to-Date-\$

800.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Warren C. Scoville
 1106 Summit Ridge Dr.**

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

attorney

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

**Senator Jon Ackerson
 100 North Sixth Street**

Louisville, KY 40202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

KY

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

300.00

Occupation

State Senator

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Henry V. Heuser, Jr.
 3902 Napanee Road**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

150.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

8
2
0
7
0
2
0
P
C
S

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Alton Taylor
Route 1

Hanson, KY 42413

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-04-84

Amount of Each
Receipt this Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Dr. & Mrs. Bruce Barton
Route 1, Box 364

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self/Self

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

500.00

Occupation

Doctor/Homemaker

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Dr. Herbert R. Booth
U.S. Hwy 42
Box 213
Union, KY 41091

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

400.00

Occupation

Doctor

Aggregate Year-to-Date-\$

900.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Peggy W. Kirk
P. O. Box 331

Inez, KY 41224

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Paul M. Lockhart
4301 Taylorsville Road

Louisville, KY 40220

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

350.00

Occupation

homemaker

Aggregate Year-to-Date-\$

350.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Jane Clark
1400 Willow-2101

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

10-11-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$

750.00

G. Full Name, Mailing Address and ZIP Code

Mr. Willodyne Miller
205 Perryman Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-12-84

Amount of Each
Receipt This Period

1000.00

Occupation

Executive Director

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional).....

2850.00

TOTAL This Period (last page this line number only).....

84020240936

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles W. Crawford
 3365 Padaro Lane

Carpinteria, CA 93013

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-17-84

Amount of Each
Receipt this Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Dr. Garry W. Neltner, D.P.M.
 3117 Hudnall Avenue

Covington, KY 41017

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

1300.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Robert M. Duncan
 Box 331

Inez, KY 41224

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

1000.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Ms. Opal Ann Parrott
 1109 N. Main

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Kentucky Mountain Trading Co.

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

200.00

Occupation

owner

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Juliette C. Forrester
 3716 Fairway Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. John R. Raker
 3109 Springcrest Drive

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. J. H. Graves, III
 5081 Winchester Pike

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Second National Bank

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

500.00

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4450.00

TOTAL This Period (last page this line number only)

7374020240937

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Ruth Robinson
 101 Woodland Drive

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt this Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth W. Hardwick
 128 Council Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-12-84

Amount of Each
 Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$

750.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Louise Lyman Shaver
 3105 Boxhill Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-09-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. James H. Adams
 1545 Wilshire Boulevard

Los Angeles, CA 90017

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Henry V. Heuser, Jr.
 3902 Napanee Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-09-84

Amount of Each
 Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Kenneth O. Taylor
 Rt. 4, Box 139C

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cimmeron Mining

Date (month,
 day, year)

10-10-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Nelda Barton
 1311 7th Street Road

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Health Systems

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

250.00

Occupation

Nursing Homes

Aggregate Year-to-Date-\$

450.00

SUBTOTAL of Receipts This Page (optional)

3350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. J. Glennon Walsh
 4702 Crofton Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt this Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Diana L. Boyd
 R. R. 3, Box 239

Georgetown, IN 47122

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert L. Kirkland
 609 Raintree Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

1000.00

Occupation

banker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Fred V. Lucas
 207 W. 7th St.

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Polly Z. Cochran
 25 Stone Bridge Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

400.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Thomas W. Moller
 P. O. Box 2059
 111 Church Street
 Lexington, KY 40594

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Interest Rate Management, Inc.

Date (month,
day, year)

10-11-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

1250.00

G. Full Name, Mailing Address and ZIP Code

Mr. George P. Crounse
 105 Sycamore Drive

Paducah, KY 42001

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-02-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Emler Neuman, Jr.
825 Walnut Hill Pike

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt this Period

1000.00

Occupation

Dentist

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. William H. Elliott
1188 Coldwater Canyon Drive

Beverly Hills, CA 90210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Angeles Corporation

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

250.00

Occupation

Chairman & CEO

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Ms. Suzanne Parry
33 Orchard Hill Road

Fort Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Robert E. Fox
1405 Meganwood Circle

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lasmo & Term

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

200.00

Occupation

President

Aggregate Year-to-Date-\$ 650.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Bonnie Jo Rechter
1906 Decatur Drive

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-12-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Elgene Lewis Gross
802 South Main

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Joe M. Rodas
400 Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

300.00

Occupation

financial counselor

Aggregate Year-to-Date-\$ 600.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

06402024990

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. R. H. Hargrove
525 Southfield Road

Shreveport, LA 71106

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

housewife

Aggregate Year-to-Date—\$

10-17-84

550.00

Amount of Each
Receipt this Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Weldon Shouse
2033 Lakeside Drive

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

Attorney

Aggregate Year-to-Date—\$

10-16-84

500.00

Amount of Each
Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Morgan Adams, Jr.
1545 Wilshire Boulevard

Los Angeles, CA 90017

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date—\$

10-17-84

250.00

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. John G. Heyburn, II
55 Hill Road

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brown, Todd & Heyburn

Occupation

Lawyer

Aggregate Year-to-Date—\$

10-16-84

800.00

Amount of Each
Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Wayne G. Basler
P. O. Box 929
1400 Lincoln Avenue
Kingsport, TN 37662

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

AFG Industries, Inc.

Occupation

President

Aggregate Year-to-Date—\$

10-17-84

250.00

Amount of Each
Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Ina Brown Johnson
14 River Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Homemaker

Aggregate Year-to-Date—\$

10-03-84

1750.00

Amount of Each
Receipt This Period

750.00

G. Full Name, Mailing Address and ZIP Code

Ms. Catherine Y. Warner
411 Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

student

Aggregate Year-to-Date—\$

10-12-84

1000.00

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Sue Kiser
Route 1, Parrent Lane
Box 340
Finchville, KY 40022

Name of Employer

Fairlight Valley Farm

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

1000.00

Occupation

Owner

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Carroll L. Lurding
P.O. Box 7461
326 Mockingbird Hill Rd.
Louisville, KY 40207

Name of Employer

self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

500.00

Occupation

architect

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Ruby Coleman
Box 2009

Name of Employer

Self employed

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

750.00

Occupation

Homemaker

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Larry D. Moon
414 Mockingbird Hill Road

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

350.00

Occupation

Information Requested

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mr. Walden Cuddy
Box 168

Name of Employer

grocery store

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

100.00

Occupation

owner

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Phillip B. Newman
440 Lightfoot Road

Name of Employer

none

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

100.00

Occupation

Retired

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

Mr. Charles Elza
Route 1, Box 136

Name of Employer

Information Requested

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional).....

3800.00

TOTAL This Period (last page this line number only)

94020240992

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. W. V. Pierce
 822 North Ft. Thomas Avenue

Fort Thomas, KY 41075

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired physician

Aggregate Year-to-Date-\$

10-17-84

240.00

Amount of Each
 Receipt this Period

30.00

B. Full Name, Mailing Address and ZIP Code

Mr. Samuel R. Rechter
 1906 Decatur Drive

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Rogers Group Inc.

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$

10-12-84

1000.00

Amount of Each
 Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Charles J. Guelda, Jr.
 314 Burnswick Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

civil service

Occupation

employee

Aggregate Year-to-Date-\$

10-12-84

1000.00

Amount of Each
 Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Diane F. Royce
 34 Stonebridge Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

10-09-84

250.00

Amount of Each
 Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
 Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

Retired

Aggregate Year-to-Date-\$

10-09-84

450.00

Amount of Each
 Receipt This Period

200.00

F. Full Name, Mailing Address and ZIP Code

Mr. James T. Sleadd
 4604 Lowe Road

Louisville, KY 40220

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-16-84

350.00

Amount of Each
 Receipt This Period

350.00

G. Full Name, Mailing Address and ZIP Code

Mr. William A. Adams

get correct address, KY 40000

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-10-84

1000.00

Amount of Each
 Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3830.00

TOTAL This Period (Use page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Martha Heyburn
55 Hill Road

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

physician

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt this Period

300.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Don Thompson
Box 166

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Thomas J. Belville
2905 Ranch Road

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self Employed

Occupation

Owner/Mining Co.

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

500.00

D. Full Name, Mailing Address and ZIP Code

Dr. J. Wesley Johnson
2222 Winchester

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Physician

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Suzanne Warner
1265 Bassett Ave.

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Attorney

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

450.00

F. Full Name, Mailing Address and ZIP Code

Mr. Roger Bright
1303 Clear Springs Trace

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Bright Construction Co., Inc.

Occupation

Homebuilder

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Dr. Eugene E. LaCroix
17011 N. 54th Street

Scottsdale, AZ 85255

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Doctor

Aggregate Year-to-Date—\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

84020240994

SCHEDULE A

ITEMIZED RECEIPTS

Page 13 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Grady Carmack
Route 4**

Benton, KY 42025

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Date (month,
day, year)

10-02-84

Amount of Each
Receipt this Period

1000.00

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Kenneth A. Matthews
105 Winston Road**

Mount Laurel, NJ 08054

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

First Wayne Corporation

Occupation

Vice President

Date (month,
day, year)

10-12-84

Amount of Each
Receipt This Period

750.00

Aggregate Year-to-Date-\$

750.00

C. Full Name, Mailing Address and ZIP Code

**Mr. George Hunt Collins
4 Overbrook Road**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

Self

Occupation

President/Owner

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

400.00

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

**Mr. Clay L. Morton
398 Mockingbird Valley Rd**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

Wyatt, Tarrant and Combs

Occupation

Attorney

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Elmer Willis Cunnagin, Jr.
4th and Main Streets**

London, KY 40741

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

Laurel County

Occupation

County Attorney

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

100.00

Aggregate Year-to-Date-\$

280.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Harold W. Newton
P. O. Box 355**

Hawesville, KY 42348

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

self

Occupation

attorney at law

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

50.00

Aggregate Year-to-Date-\$

230.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Kim Elza
Route 11, Box 379**

London, KY 40741

Receipt For: ☐ Primary ☒ **General**
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

5
9
9
0
2
4
0
2
0
2
0
4
0
8

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Ira B. Potter Box 190 Lackey, KY 41643	self	10-16-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.	Aggregate Year-to-Date-\$	1000.00
B. Full Name, Mailing Address and ZIP Code Dr. K. Thomas Reichard 2425 Cherokee Pkwy. Louisville, KY 40204	Self-employed	10-16-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation physician	Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code Mr. Jack O. Guy Six Piedmont CTR. Suite 712 Atlanta, GA 30305	Johnson Lane Spad Smith & Co.	10-17-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation vice president	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code Mr. Mark Searce P. O. Box 489 Shelbyville, KY 40065	Self-employed	10-15-84	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation merchant	Aggregate Year-to-Date-\$	225.00
E. Full Name, Mailing Address and ZIP Code Mrs. Lillian A. Hart Route 2 Falmouth, KY 41040	USDA-ASES	10-16-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation St. Director	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code Mr. R. C. Soaper P.O. Box 215 Henderson, KY 42420	Soaper Chemical	10-17-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$	550.00
G. Full Name, Mailing Address and ZIP Code Dr. J. Kenneth Allen 6116 Fox Valley Drive Prospect, KY 40059	self employed	10-10-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date-\$	300.00
SUBTOTAL of Receipts This Page (optional)			2425.00
TOTAL This Period (last page this line number only)			

6
9
9
4
0
2
0
2
0
4
0
6

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Charles T. K. Ho 909 East Broadway Louisville, KY 40204	Performance Motors	10-16-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation businessman	Aggregate Year-to-Date-\$ 1000.00	
<input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert M. Timmerman 2009 Camargo Road Louisville, KY 40207	self employed	10-16-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Management Consultant	Aggregate Year-to-Date-\$ 550.00	
<input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George W. Benoit 175 Violet Drive Pearl River, NY 10965	Information Requested	10-10-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Information Requested	Aggregate Year-to-Date-\$ 500.00	
<input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Louise F. Johnson Catawba Farm 1891 Muir Station Pike Lexington, KY 40511	self	10-09-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation horsebreeder	Aggregate Year-to-Date-\$ 250.00	
<input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Charmaine A. Webster 254B Murray Drive King Of Prussia, PA 19406	First Wayne Corporation	10-12-84	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Treasurer	Aggregate Year-to-Date-\$ 750.00	
<input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul D. Broughton 11706 E. Arbor Drive Anchorage, KY 40223	Information Requested	10-16-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Information Requested	Aggregate Year-to-Date-\$ 1000.00	
<input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Gene LaCroix 1700 Park Shore Road La Grange, KY 40031	self	10-16-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation Arabian Horse Breeder & Trainer	Aggregate Year-to-Date-\$ 2000.00	
<input type="checkbox"/> Other (specify):			
SUSTOTAL of Receipts This Page (optional)			4800.00
TOTAL This Period (last page this line number only)			

84020240997

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Grady Carmack
Route 4

Benton, KY 42025

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

General Tire

Date (month,
day, year)

10-02-84

Amount of Each
Receipt this Period

1000.00

Occupation

electrician

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Ms. Carolena Mayer
Route 4, James Lane

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

500.00

Occupation

horseowner

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gorman Collins
59 South First Avenue

Prestonburg, KY 41653

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

WDAC, Inc.

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

200.00

Occupation

self employed

Aggregate Year-to-Date-\$

230.00

D. Full Name, Mailing Address and ZIP Code

Dr. Antoine S. Munther
Dowell Road

Russell Springs, KY 42642

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Surgeon

Aggregate Year-to-Date-\$

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$

405.00

F. Full Name, Mailing Address and ZIP Code

Mr. William M. Noland
Route 2

Harrodsburg, KY 40330

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-01-84

Amount of Each
Receipt This Period

50.00

Occupation

retired

Aggregate Year-to-Date-\$

650.00

G. Full Name, Mailing Address and ZIP Code

Mr. William Emrick
1557 Winchester Road

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2275.00

TOTAL This Period (last page this line number only)

84020240998

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lee F. Powell
3649 Forest Circle

Paducah, KY 42001

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Old Hickory Clay Co.

Occupation

mining Ceramic Clays

Aggregate Year-to-Date-\$

10-17-84

300.00

Amount of Each
Receipt This Period

100.00

B. Full Name, Mailing Address and ZIP Code

Mr. Doug Garner
2915 HI 53

La Grange, KY 40031

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-08-84

1050.00

Amount of Each
Receipt This Period

50.00

C. Full Name, Mailing Address and ZIP Code

Mr. Walter S. Reichert
4909 E. Manslick Road

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

E. I. DuPont

Occupation

Lab Tech

Aggregate Year-to-Date-\$

10-04-84

225.00

Amount of Each
Receipt This Period

25.00

D. Full Name, Mailing Address and ZIP Code

Mr. Abe Schecter
500 La Fontenay Court

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-16-84

1000.00

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Richard W. Hartnett
204 Dodge Road

Rowley, MA 01969

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Kidder, Peabody & Co.

Occupation

Investment banker

Aggregate Year-to-Date-\$

10-08-84

300.00

Amount of Each
Receipt This Period

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Douglas D. Stegner
1644 Cherokee Road

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Meidinger, Inc.

Occupation

Consultant

Aggregate Year-to-Date-\$

10-15-84

500.00

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Phillip Richard Anderson, Jr.
11100 Ridge Road

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

attorney

Aggregate Year-to-Date-\$

10-05-84

1000.00

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2975.00

TOTAL This Period (last page this line number only)

9402231099

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Linda Ho c/o Charles T. K. Ho 909 East Broadway Louisville, KY 40204	self	10-16-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Mr. Kenneth W. Towery 908 Rugby Place Louisville, KY 40222	Name of Employer Ken Towery Firestone	Date (month, day, year) 10-09-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. John E. Bickel, Jr. 2906 Cheyenne Dr. Owensboro, KY 42301	Name of Employer self	Date (month, day, year) 10-05-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Willie Ray Jones Rt. #5, Box 231 London, KY 40741	Name of Employer Self	Date (month, day, year) 10-08-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Coal Producer	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Mr. Albert Wernik 1301 Dove Drive Jeffersonville, IN 47130	Name of Employer Information Requested	Date (month, day, year) 10-16-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Madeline LaCroix 1700 Park Shore Road La Grange, KY 40031	Name of Employer self	Date (month, day, year) 10-08-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1800.00	
G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack Leith Lane, Apt. #715 Louisville, KY 40218	Name of Employer McConnell Senate Committee	Date (month, day, year) 10-15-84	Amount of Each Receipt This Period 3.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Political Consultant	Aggregate Year-to-Date-\$ 313.00	
SUBTOTAL of Receipts This Page (optional)			5003.00
TOTAL This Period (last page this line number only)			

84020241000

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Jerry Mayes
1010 Sherwood Drive

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Dentist

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Ted Cook
Route #7
Box 262 A

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self employed

Occupation

Firestone Tires Dist

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Susan G. Musson
306 Hillcrest Avenue

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Willis Day
Box 258-B
Str. Route
Mammoth Cave, KY 42259

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

50.00

E. Full Name, Mailing Address and ZIP Code

Mr. William M. Noland
Route 2

Harrodsburg, KY 40330

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

100.00

F. Full Name, Mailing Address and ZIP Code

Mr. Victor L. Priebe
1001 South Buckeye Lane

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Action Now, Inc.

Occupation

Executive Director

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Doug Garner
2915 HI 53

La Grange, KY 40031

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

950.00

SUBTOTAL of Receipts This Page (optional)

3850.00

TOTAL This Period (last page this line number only)

84020241001

SCHEDULE A

ITEMIZED RECEIPTS

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category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Irene S. Hall
820 Rugby Place

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-03-84

Amount of Each
Receipt this Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Jeff Schecter
3600 Woodside Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William E. Hellmann
3225 Murray Hill Pike

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Stites, McElwain, & Fowler

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

400.00

Occupation

Attorney

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. J. W. Steinman, III
443 Morgan Street

Ft. Thomas, KY 41071

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Deluxe Engraving Co.

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

550.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Sara Wood Armour
303 Bluffs Edge Drive

Lake Forest, IL 60045

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Edwin S. Hopson
3003 Lighthouse Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Wyatt, Tarrant & Combs

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Sara C. Travis
744 Cottage Grove Ln.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

450.00

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

84020241002

SCHEDULE A

ITEMIZED RECEIPTS

Page 21 of 26 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Curtis J. Block 10610 U.S. 42 Prospect, KY 40059	Name of Employer Rudd Construction Equip. Co.	Date (month, day, year) 10-10-84	Amount of Each Receipt This Period 1000.00
	Occupation Executive		
	Aggregate Year-to-Date—\$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Mr. A. Minis Jr. P. O. Box 23559 Savannah, GA 31403	Name of Employer Information Requested	Date (month, day, year) 10-17-84	Amount of Each Receipt This Period 250.00
	Occupation Information Requested		
	Aggregate Year-to-Date—\$ 250.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Mrs. Naomi S. Wernik 1301 Dove Drive Jeffersonville, IN 47130	Name of Employer self	Date (month, day, year) 10-16-84	Amount of Each Receipt This Period 1000.00
	Occupation homemaker		
	Aggregate Year-to-Date—\$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Dr. Jerry B. Buchanan 5615 Wolf Pen Trace Prospect, KY 40059	Name of Employer Information Requested	Date (month, day, year) 10-10-84	Amount of Each Receipt This Period 500.00
	Occupation Physician		
	Aggregate Year-to-Date—\$ 500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mr. Baylor Landrum, Jr. 3729 Fairway Lane Louisville, KY 40207	Name of Employer Self-NTVL	Date (month, day, year) 10-10-84	Amount of Each Receipt This Period 250.00
	Occupation Insurance Executive		
	Aggregate Year-to-Date—\$ 250.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Dr. James E. Carter 805 N. Main St. Tompkinsville, KY 42167	Name of Employer self	Date (month, day, year) 10-17-84	Amount of Each Receipt This Period 300.00
	Occupation M. D.		
	Aggregate Year-to-Date—\$ 400.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mr. Joseph B. McClain P. O. Box 9 Paris, KY 40361	Name of Employer The Hopewell Co, Inc.	Date (month, day, year) 10-09-84	Amount of Each Receipt This Period 500.00
	Occupation Independent Ins. Agent		
	Aggregate Year-to-Date—\$ 500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			3800.00
TOTAL This Period (list page this line number only)			

84020241003

SCHEDULE A

ITEMIZED RECEIPTS

Page 22 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. Richard E. Cooper 501 North Main Street P.O. Box 183 Somerset, KY 42501		Name of Employer none	Date (month, day, year) 10-12-84	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Dr. John W. Deming 3600 Parliament Drive Alexandria, LA 71301		Name of Employer self employed	Date (month, day, year) 10-17-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Aggregate Year-to-Date-\$ 750.00	
C. Full Name, Mailing Address and ZIP Code Mr. Orville Nunn P. O. Box 254 Bonnieville, KY 42713		Name of Employer Orville Nunn and Sons Sanitation	Date (month, day, year) 10-02-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation owner	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Dr. Ronald Falls 3204 Woodside Road Louisville, KY 40222		Name of Employer self	Date (month, day, year) 10-03-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Doctor	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mr. Doug Garner 2915 HI 53 La Grange, KY 40031		Name of Employer Information Requested	Date (month, day, year) 10-16-84	Amount of Each Receipt This Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Aggregate Year-to-Date-\$ 1050.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Miles Haman Apt. 305 Charleston Apts. Paducah, KY 42001		Name of Employer none	Date (month, day, year) 10-09-84	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation none	Aggregate Year-to-Date-\$ 1450.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Janet B. Schmidt P. O. Box 647 Elizabethtown, KY 42701		Name of Employer self	Date (month, day, year) 10-03-84	Amount of Each Receipt This Period 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Aggregate Year-to-Date-\$ 750.00	
SUBTOTAL of Receipts This Page (optional)				2200.00
TOTAL This Period (last page this line number only)				

24020241004

SCHEDULE A

ITEMIZED RECEIPTS

Page 23 of 28 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. W. D. Henderson 2921 Palm Avenue Manhattan Beach, CA 90266	Name of Employer Kidder, Peabody & Co. Occupation Investment Banker	Date (month, day, year) 10-08-84	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 300.00		
B. Full Name, Mailing Address and ZIP Code Mr. J. W. Steinman, III 443 Morgan Street Ft. Thomas, KY 41071	Name of Employer Deluxe Engraving Co. Occupation attorney	Date (month, day, year) 10-17-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 550.00		
C. Full Name, Mailing Address and ZIP Code Mr. W. James Host c/o Host & Associates 120 Kentucky Ave. Lexington, KY 40502	Name of Employer Host Communications, Inc. Occupation President	Date (month, day, year) 10-16-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Mr. and Mrs. Kenneth J. Tuggle 3715 Lime Kiln Lane Louisville, KY 40222	Name of Employer Brown, Todd & Heyburn Occupation Attorney/homemaker	Date (month, day, year) 10-12-84	Amount of Each Receipt This Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 650.00		
E. Full Name, Mailing Address and ZIP Code Mr. R. C. Block 10610 U.S. Highway 42 Prospect, KY 40059	Name of Employer Information Requested Occupation Information Requested	Date (month, day, year) 10-10-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
F. Full Name, Mailing Address and ZIP Code Mr. Paul G. Keller 880 Albany Rd. Lexington, KY 40502	Name of Employer Information Requested Occupation Information Requested	Date (month, day, year) 10-08-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
G. Full Name, Mailing Address and ZIP Code Senator James P. Bunning 30 Winston Hill Rd. Ft. Thomas, KY 41075	Name of Employer self Occupation oil producer	Date (month, day, year) 10-08-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		
SUBTOTAL of Receipts This Page (optional)			3500.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 24 of 28 for
 LINE NUMBER 11(3)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
<u>McConnell Senate Committee</u>			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Charles Leibson 740 Zorn Avenue, #3J Louisville, KY 40206	self	10-09-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Joanna L. Carter 364 Secretariat Trail Corbin, KY 40701	self	10-08-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 450.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Bruce McCrea 1101 Park Shore Road La Grange, KY 40031	Bruce McCrea Management Co.	10-08-84	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date-\$ 350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lovrick P. Corn P. O. Box 140 Columbus, GA 31993	W. C. Bradley Co.	10-17-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Robert McLean Nash Covered Bridge Road Prospect, KY 40059	self	10-05-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 700.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. C. A. Dixon Box 970 Hyden, KY 41776	none	10-15-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date-\$ 430.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Frank A. Pachmayr 2845 Medill Place Los Angeles, CA 90064	self	10-17-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			1800.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 25 of 28 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mrs. Margaret L. Fields 7408 Dixie Highway Florence, KY 41042	Name of Employer Self Occupation Real Estate Broker	Date (month, day, year) 10-15-84	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 210.00		
B. Full Name, Mailing Address and ZIP Code Mrs. Sherri Garner 2915 HI 53 La Grange, KY 40031	Name of Employer self Occupation homemaker	Date (month, day, year) 10-16-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Mrs. Alberta A. Roach 1 St. David's Road St. David's, PA 19087	Name of Employer self Occupation homemaker	Date (month, day, year) 10-12-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Mrs. Miles Haman Apt. 305 Charleston Apts. Paducah, KY 42001	Name of Employer none Occupation none	Date (month, day, year) 10-09-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1450.00		
E. Full Name, Mailing Address and ZIP Code Mr. William B. Schmidt 720 Sunrise Lane Elizabethtown, KY 42701	Name of Employer Coco-Cola-Elizabethtown Occupation Business Executive	Date (month, day, year) 10-03-84	Amount of Each Receipt This Period 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1750.00		
F. Full Name, Mailing Address and ZIP Code Mr. Harvey E. Hensley Route 5, Box 81 213 Main Street Manchester, KY 40962	Name of Employer W & H Coal Co Occupation Coal Operator	Date (month, day, year) 10-08-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 1100.00		
G. Full Name, Mailing Address and ZIP Code Mr. John W. Sutherland get correct address, KY 40000	Name of Employer Information Requested Occupation Information Requested	Date (month, day, year) 10-15-84	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date--\$ 300.00		
SUBTOTAL of Receipts This Page (optional)			4330.00
TOTAL This Period (last page this line number only)			

84020241007

SCHEDULE A

ITEMIZED RECEIPTS

Page 26 of 28 for
LINE NUMBER 11(2)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ricky Householder
R. R. 3, Box 331-A

Clay, KY 42404

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-12-84

Amount of Each
Receipt this Period

300.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Dr. George I. Uhde
270 Medical Towers South

Louisville, KY 40202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor, F.A.C.

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Suz-Anne C. Bollinger
4000 Glenview Avenue

Glenview, KY 40025

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. John H. Yost
13100 Osage Rd. North

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

750.00

E. Full Name, Mailing Address and ZIP Code

Mr. J. A. Burnett
810 Norlando Avenue

Maitland, FL 32751

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Contemporary Cars, Inc.

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Auto Dealer

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Lewis
104 Bentley Avenue
P. O. Box 180
Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

100.00

Occupation

Grocer

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Dr. Ballard Cassady
P. O. Box 3369

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

200.00

Occupation

surgeon

Aggregate Year-to-Date-\$

300.00

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 27 of 28 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles T. Melvin
 555 North Court Street

Paintsville, KY 41240

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

I.G.A. Store

Date (month,
 day, year)

10-03-84

Amount of Each
 Receipt this Period

300.00

Occupation
 owner

Aggregate Year-to-Date-\$ 800.00

B. Full Name, Mailing Address and ZIP Code

Mr. Jennings Corum

Manchester, KY 40962

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. John T. Nelson
 7647 National Turnpike

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 300.00

D. Full Name, Mailing Address and ZIP Code

Dr. Joseph J. Dobner
 727 Reed Drive

Frankfort, KY 40601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

500.00

Occupation

Medical Doctor

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Frank A. Pachmayr
 2845 Medill Place

Los Angeles, CA 90064

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Brenda Adams Fleishman
 4107 Woodstone Way

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-05-84

Amount of Each
 Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Dr. Emanuel Rader
 414 Tennessee Avenue
 P. O. Box 70
 Pineville, KY 40977

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

500.00

Occupation

Physician

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

94020241009

SCHEDULE A

ITEMIZED RECEIPTS

Page 28 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles W. Goering
14 Leathers Road

Ft. Mitchell, KY 41017

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Erlanger Lumber Company

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

750.00

B. Full Name, Mailing Address and ZIP Code

Mr. Dean William Roach
One St. Davids Road

St. David's, PA 19087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

First Wayne Corporation

Date (month,
day, year)

10-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

Entrepreneur

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
Apt. 305

Charleston Apts.
Paducah, KY 42001

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

200.00

Occupation

none

Aggregate Year-to-Date-\$

1450.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Helen L. Scott
P.O. Box 7

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. John M. Hess
P. O. Box 1946

Owensboro, KY 42302

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Edward D. Jones & Co.

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

200.00

Occupation

investment broker

Aggregate Year-to-Date-\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Paul Tafel, Jr.
506 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

96830.50

84020241010

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11(b)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Boyd Co. Republican Women's Club C/O Alene Ratcliff 2431 Henderson Street Ashland, KY 41101	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10-09-84	

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 50.00

B. Full Name, Mailing Address and ZIP Code Republican Party of Floyd Co. C/O Ron Frasure 406 Lake Drive Prestonsburg, KY 41653	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10-17-84	

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 112.00

C. Full Name, Mailing Address and ZIP Code Republican Party of Logan Co. C/O Lois Johns Crittenden Circle Russellville, KY 42276	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10-04-84	

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 60.00

D. Full Name, Mailing Address and ZIP Code Kenton Co. Rep. Women's Club c/o Luella L. Bronesky, Treas. #8 Superior Drive Ft. Mitchell, KY 41017	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10-11-84	

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 50.00

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

SUBTOTAL of Receipts This Page (optional) 272.00

TOTAL This Period (last page this line number only) 272.00

110402024101

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
LINE NUMBER 11 (g)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

CIEPAC of Dow Chemical, U.S.A.
9550 Zionsville Road
P. O. Box 68511
Indianapolis, IN 46268

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-04-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Citizens for the Republic
1253 -7th Street
Suite 200
Santa Monica, CA 90401

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-15-84

5000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 7500.00

C. Full Name, Mailing Address and ZIP Code

I Love America Committee
303-6th Street

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-12-84

200.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 200.00

D. Full Name, Mailing Address and ZIP Code

WMI PAC
3003 Butterfield Road
Oak Brook, IL 60521

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-10-84

2000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 2000.00

E. Full Name, Mailing Address and ZIP Code

CLARKPAC
C/O Clark Equipment Company
Circle Drive
Buchanan, MI 40324

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-10-84

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 7500.00

F. Full Name, Mailing Address and ZIP Code

Inland Container Corp. (INPAC)
151 North Delaware Street
P. O. Box 925
Indianapolis, IN 46206

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-02-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Campaign America
c/o Senator Robert Dole
919 Prince Street
Alexandria, VA 22314

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 10000.00

SUBTOTAL of Receipts This Page (optional)

13200.00

TOTAL This Period (last page this line number only)

84020241012

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 3 for
 LINE NUMBER 11(C)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Tenneco Employees Good Govt. Fund

P. O. Box 2511
Houston, TX 77001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

500.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Campaign America
c/o Senator Robert Dole
919 Prince Street
Alexandria, VA 22314

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 10000.00

C. Full Name, Mailing Address and ZIP Code

Fund For a Conservative Majority
Mr. Robert C. Heckman, Chairman
302 Fifth Street, NE.
Washington, DC 20002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

13.50

Occupation

In-Kind
Miscellaneous

Aggregate Year-to-Date-\$ 1526.96

D. Full Name, Mailing Address and ZIP Code

Fund For a Conservative Majority
Mr. Robert C. Heckman, Chairman
302 Fifth Street, NE.
Washington, DC 20002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

13.46

Occupation

In-Kind
Miscellaneous

Aggregate Year-to-Date-\$ 1526.96

E. Full Name, Mailing Address and ZIP Code

H. J. Ruff PAC
C/O Neal Blair
P. O. Box 881
Centreville, VA 22020

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-15-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Brown-Forman Pol. Action Comm.
850 Dixie Highway
Louisville, KY 40210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-03-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

FLO-PAC
P. O. Box 1338

Thomasville, GA 31792

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-10-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

SUBTOTAL of Receipts This Page (optional)

11026.96

TOTAL This Period (last page this line number only)

3
1
0
1
0
2
4
0
2
0
3

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
LINE NUMBER 21 ()
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

NAPAC
P. O. Box 1967

Ardmore, OK 73401

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-10-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Public Service PAC
Mr. Roman K. Rice III, Treasurer
8330 Old Courthouse Road, Ste 600
Vienna, VA 22130

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-11-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 10000.00

C. Full Name, Mailing Address and ZIP Code

Assoc of Amer. Phys & Surg. PAC
Mr. Charles Ord
5201-B Lyngate Court
Burke, VA 22015

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-04-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 9360.00

D. Full Name, Mailing Address and ZIP Code

Wilson Foods Corporation
Ms. Mary M. Phillips, Chairman

Oklahoma City, OK 73105

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-16-84

200.00

Occupation

Aggregate Year-to-Date-\$ 200.00

E. Full Name, Mailing Address and ZIP Code

RAYPAC
Raymond International PAC
P. O. Box 22718
Houston, TX 77027

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-04-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Assoc. Equipment Dist. PAC
1101-15th St., NW., Suite 1010

Washington, DC 20005

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-16-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

9200.00

TOTAL This Period (last page this line number only)

33426.96

84020241014

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-05-84

670.32

Occupation

Aggregate Year-to-Date—\$ 11874.67

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

670.32

TOTAL This Period (last page this line number only)

670.32

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Victoria Williams 6703 Ashmeade Drive Louisville, Kentucky 40291	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-15-84	2.90
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Ballard 3629 Fountain Drive, Apt. #3 Louisville, KY. 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	108.53
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	52.10
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Delta Temporary, Inc. 224B Executive Park Louisville, KY 40207	Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	212.75
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peggy Fucella 1313 Tanglewood Trail Louisville, KY 40223	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	284.48
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
K. S. Air, Inc. 4510 Mt. Vernon Rd. Louisville, Ky. 40220	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	2968.50
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc P. O. Box 50190 Indianapolis, IN 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	44,949.33
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Paul Reid 107 Finley #P-5 Louisville, KY 40220	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	82.08
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Information Systems 9300 Shelbyville Road Louisville, Kentucky 40222	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	416.00
SUBTOTAL of Disbursements This Page (optional)			49,076.67
TOTAL This Period (last page this line number only)			

84020241016

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 10
 LINE NUMBER 17
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Victoria Williams 6703 Ashmeade Drive Louisville, Kentucky 40291	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/10/84	25.83
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Biomedical Comm. Center Health Sciences Center U of L Louisville, KY 40292	Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	71.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	127.10
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	140.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY. 40220	Airplane rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	2,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/10/84	10,387.12
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	148.05
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	103.20

SUSTOTAL of Disbursements This Page (optional) 13,502.80

TOTAL This Period (last page this line number only)

84020241017

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Express Press 4400 Bishop Lane Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/3/84	9.45
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	556.15
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kentucky Press Service, Inc. 332 Capitol Avenue Frankfort, Kentucky 40601	Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	140.63
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group P. O. Box 50190 Indianapolis, IN 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	67,091.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P. O. Box 32440 Louisville, Ky 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	1,443.39
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Todd Smith 2825 Lexington Rd. Box 3361 Louisville, KY 40220	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	117.25
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.B.C. Printing 3520 College Drive Louisville, KY 40299	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	1,097.25
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Terry Wallingford 3974 Yearling Ct. Cincinnati, OH 45211	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	120.60
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Terry Carmack 3201 Leith Lane #715 Louisville, KY. 40218	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/16/84	160.13
SUBTOTAL of Disbursements This Page (optional)			70,735.85
TOTAL This Period (last page this line number only)			

84020241018

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/3/84	Amount of Each Disbursement This Period 73.13
B. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford, Apt. #847 Louisville, KY 40291	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/5/84	Amount of Each Disbursement This Period 187.15
C. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/8/84	Amount of Each Disbursement This Period 16,181.50
D. Full Name, Mailing Address and ZIP Code Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/8/84	Amount of Each Disbursement This Period 107.20
E. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Pkwy Louisville, Kentucky 40299	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/4/84	Amount of Each Disbursement This Period 90.72
F. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/4/84	Amount of Each Disbursement This Period 155.93
G. Full Name, Mailing Address and ZIP Code Ms. Victoria Hensley 11 Mason Court Villa Hill, Kentucky 41016	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/8/84	Amount of Each Disbursement This Period 80.40
H. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford, Apt. #847 Louisville, KY 40291	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/5/84	Amount of Each Disbursement This Period 286.45
I. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254	Purpose of Disbursement Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/4/84	Amount of Each Disbursement This Period 25.19
SUBTOTAL of Disbursements This Page (optional)			17,187.67
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Summary Page)

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Name of Committee (In Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	43.84
B. Full Name, Mailing Address and ZIP Code Ailes Communications Inc 456 West 43rd Street New York, New York 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	5,590.00
C. Full Name, Mailing Address and ZIP Code Copy Corp 10420 Bluegrass Pkwy Louisville, KY 40299	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	62.00
D. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, Ky. 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/9/84	166.43
E. Full Name, Mailing Address and ZIP Code Susan Hill 2825 Lexington Road Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	104.69
F. Full Name, Mailing Address and ZIP Code Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	97.69
G. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford, Apt. #847 Louisville, Kentucky 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	514.17
H. Full Name, Mailing Address and ZIP Code Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	459.61
I. Full Name, Mailing Address and ZIP Code Jack Telle 2215 Talbott Avenue Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	92.27
SUBTOTAL of Disbursements This Page (optional)			7,130.70
TOTAL This Period (last page this line number only)			

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ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communication Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	4,800.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Copy Shop 1941 Bishop Lane, Suite 106 Louisville, Kentucky 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	381.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Express Press 4400 Bishop Lane Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/10/84	155.66
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	790.42
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center P. O. Box 1679 Louisville, KY 40291	Office Furniture Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	285.86
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sharon Pierce 5609 Oxford, Apt. #847 Louisville, Kentucky 40291	Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/16/84	187.64
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Shea 4601 Lincoln Road Louisville, Ky 40220	Travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/2/84	346.15
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Don Triplett 3317 Oleanda Louisville, KY 40215	Contact Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	70.35
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communications Inc. 456 W. 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	1,000.00
SUBTOTAL of Disbursements This Page (optional)			8,017.08
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Copy Shop 1941 Bishop Lane, Suite 106 Louisville, KY 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	123.75
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corp. P. O. Box 727 Dept A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	12.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Janet Mullins 1249 Everett Ave, Louisville, KY. 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	1,061.69
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Oakley Vieux Carre Apts., Apt. #16 Louisville, KY 40222	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/12/84	90.74
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes P. O. Box 38390 Louisville, KY 40223	Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	59.25
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/3/83	175.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ailes Communication, Inc. 456 W. 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/84	4,800.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Supplies 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/5/84	504.72
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/84	1,127.70
SUBTOTAL of Disbursements This Page (optional)			7,955.35
TOTAL This Period (last page this line number only)			

84020241022

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Cottrell 49 Place Janue Louisville, KY 40203	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	89.61
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corp. P. O. Box 727, Dept. A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	22.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Performance Business Forms P. O. Box 100770 Nashville, TN. 37210	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	101.33
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jack Prewitt P. O. Box 206 Liberty, KY 42539	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/11/84	280.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY. 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	92.96
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Americall, Louisville 10000 Shelbyville Road Louisville, Kentucky 40223	Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	1,090.10
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Conti P. O. Box 18289 Louisville, KY 40218	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/4/84	31.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Theresa Cole 2825 Lexington Road Louisville, Ky 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	105.53
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/2/84	500.00
SUBTOTAL of Disbursements This Page (optional)			2,312.53
TOTAL This Period (last page this line number only)			

84020241025

SCHEDULE B

ITEMIZED DISBURSEMENTS

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(Use separate schedule(s) for each
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Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corp. P. O. Box 727 Dept. A Memphis, TN 38194	Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/13/84	21.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/1/84	1,160.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Janice Monroe 2825 Lexington Road Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	46.90
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc P. O. Box 50190 Indianapolis, IN 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/1/84	31,750.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	96.31
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark Stambaugh 146 Grace Ct. #10 Covington, KY 41017	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/8/84	134.10
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/2/84	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fund for a Conservative Majority 302 Fifth Street, NE. Washington, DC 20002	Majority in Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/84	13.50
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fund for a Conservative Majority 302 Fifth Street NE. Washington, DC 20002	In Kind Miscellaneous Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/84	13.46
SUBTOTAL of Disbursements This Page (optional)			33,735.17
TOTAL This Period (last page this line number only)			

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ITEMIZED DISBURSEMENTS

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Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Neil Huffman 7501 Hunting Creek Drive Louisville, Kentucky 40059	Purpose of Disbursement In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/17/84	Amount of Each Disbursement This Period 50.00
B. Full Name, Mailing Address and ZIP Code Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, Kentucky 40243	Purpose of Disbursement In Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/17/84	Amount of Each Disbursement This Period 112.50
C. Full Name, Mailing Address and ZIP Code Liberty National Bank Louisville, KY. 40218	Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/2/84	Amount of Each Disbursement This Period 4,009.43
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			4,171.93
TOTAL This Period (last page this line number only)			213,825.75

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WINDWARD NORTH COMPANY, USA 275210
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[Handwritten signature]

SECRETARY

DEPUTY SECRETARY

HART BUILDING

SUITE 232

WASHINGTON, D.C. 20510

PHONE: 202-224-0322

United States Senate

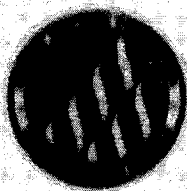
OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

- ☐ HAND DELIVERED _____
Date of Receipt _____
- ☐ INSIDE MAIL _____
Date of Receipt _____
- ☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____
Date of Receipt _____
- ☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date Of Receipt _____
- ☐ FIRST CLASS MAIL POSTMARKED _____
- ☐ REGISTERED/CERTIFIED MAIL POSTMARK _____
- ☐ NO POSTMARK
- ☐ POSTMARK ILLEGIBLE
- ☒ OTHER _____ POSTMARK Oct. 24, 1984
- AND OR DATE OF RECEIPT _____

84020241027



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20543

JUN 4 1985

NO-5

**Larry J. Steinberg, Treasurer
McCannell Senate Committee
P.O. Box 1498
Louisville, KY 40201**

Identification Number: C00155051

Reference: 12 Day Pre-General Report (10/1/84-10/17/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-For future reports, please be advised that when itemizing contributions from political committees, you should include the full name of the connected organization or a readily recognizable acronym thereof.

Any amendment or clarification should be filed with the Secretary of the Senate, 222 Hart Senate Office Building, Washington, DC 20510. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4040.

Sincerely,

**Robin Kelly
Reports Analyst
Reports Analysis Division**

05033-01720

RECEIVED *Touché Ross & Co.*
SECRETARY OF THE SENATE

1985 JAN 17 PM 1:16 January 17, 1985

HAND DELIVERED ☐

Secretary of the Senate
232 Hart Senate Office Bldg.
Washington, D.C. 20510

Re: McConnell Senate Committee FEC Identification No. C00154051
30 Day Post General Report (10/18/84 through 11/16/84)

Gentlemen:

The attached letter was received from the Federal Election Commission, indicating that we needed to file amendment to the above mentioned report to indicate whether the loan from the candidate was in fact from personal funds. While I believe that the information contained on Schedule C included in the filing clearly indicates that the monies are from the candidate's personal funds (in accordance with the instructions on the back of that Schedule), I am writing to reaffirm that the loan was in fact derived from the candidate's personal funds, as defined by Federal Election Commission Regulations.

I trust that this information will suffice for your purposes.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Enclosure



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20463

JAN 2 1985

RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: 30 Day Post-General Report (10/18/84-11/26/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

The Ross & Co.

518 West Broadway
Louisville, Kentucky 40202



Secretary of the Senate
232 Hart Senate Office Bldg.
Washington, D.C. 20510



ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

_____ HAND DELIVERED _____

_____ Date of Receipt _____

_____ INSIDE MAIL _____

_____ Date of Receipt _____

_____ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____

_____ Date of Receipt _____

_____ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____

_____ Date of Receipt _____

_____ FIRST CLASS MAIL POSTMARKED _____

_____ REGISTERED/CERTIFIED MAIL POSTMARK _____

_____ NO POSTMARK _____

_____ POSTMARK ILLEGIBLE _____

✓ _____ OTHER _____

POSTMARK

Jan 15, 1985

_____ AND OR DATE OF RECEIPT _____

85920011093

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

(Summary Page)

ALIGN AREA

1. Name of Committee (in Full)
McConnell Senate Committee

2. FEC Identification Number
000155051

Address (Number and Street)

P. O. Box 1496

City, State and Zip Code

Louisville, Kentucky 40201

3. Is this Report an Amendment?

☐ YES

☒ NO

☐ Check if address is different than previously reported.

HAND DELIVERED ☐

4.

TYPE OF REPORT

☐ April 15 Quarterly Report

☐ Twelfth day report preceding _____ (Type of Election)

☐ July 15 Quarterly Report

election on _____ in the State of _____

☐ October 15 Quarterly Report

☒ Thirtieth day report following the General Election on

☐ January 31 Year End Report

November 6, 1984 in the State of **Kentucky**

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/18/84 through 11/26/84		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (From Line 11 (e))	273,395	1,098,264
(b) Total Contribution Refunds (from Line 20 (d))	3,690	5,014
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	269,705	1,093,250
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	312,553	1,477,997
(b) Total Offsets to Operating Expenditures (from Line 14)	6,000	6,579
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	306,553	1,471,418
8. Cash on Hand at Close of Reporting Period (from Line 27)	24,770	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)		
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)	40,084	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-323-4066

Larry J. Steinberg

Type or Print Name of Treasurer

SIGNATURE OF TREASURER

December 6, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3-80)

Total Receipts Since Inception - \$1,790,436

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full): McConnell Senate Committee		Report Covering the Period: From: Oct. 18, 1984 To: Nov. 26, 1984	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees	242,138	932,965	11 (a)
(Memo Entry Unitemized \$ <u>63,546</u>)			
(b) Political Party Committees	1,646	8,814	11 (b)
(c) Other Political Committees	29,611	156,484	11 (c)
(d) The Candidate			11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).	273,395	1,098,264	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate	15,000	40,000	13 (a)
(b) All Other Loans			13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b))	15,000	40,000	13 (c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	6,000	6,579	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	13,983	26,360	15
16. TOTAL RECEIPTS (add 11 (a), 12, 13 (c), 14 and 15)	308,378	1,171,203	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	312,553	1,477,997	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	15,000	40,000	19 (a)
(b) Of All Other Loans			19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b))	15,000	40,000	19 (c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	3,690	4,014	20 (a)
(b) Political Party Committees			20 (b)
(c) Other Political Committees		1,000	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))	3,690	5,014	20 (d)
21. OTHER DISBURSEMENTS	13,815	13,815	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)	345,058	1,536,826	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	61,450	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$	308,378	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$	369,828	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$	345,058	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	24,770	27

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate Schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 West 43rd Street New York, NY 10036		58,388	33,388	25,000
Nature of Debt (Purpose): Communications training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299	634		634	
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	908			908
Nature of Debt (Purpose): Airplane Tickets				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232	2,532	3,911	3,878	2,565
Nature of Debt (Purpose): Telephone service				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	4,049	432	4,481	
Nature of Debt (Purpose): Office rent				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Datapoint Corporation P. O. Box 93192 Chicago, IL 60673	7,197	192	7,389	
Nature of Debt (Purpose): Computer equipment				
1) SUBTOTALS This Period This Page (optional)				28, 473
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, Kentucky 40207		4,706	3,873	833
Nature of Debt (Purpose): Airplane Tickets				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299	60	210	270	
Nature of Debt (Purpose): Office equipment rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	348	696	348	696
Nature of Debt (Purpose): Office equipment rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Americall Louisville 10000 Shelbyville Road Louisville, KY 40223	746	1,069	1,815	
Nature of Debt (Purpose): Long Distance Calls				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202	548	178	726	
Nature of Debt (Purpose): Office Supplies				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116		2,298	201	2,097
Nature of Debt (Purpose): Travel reimbursement				
1) SUBTOTALS This Period This Page (optional)				3,626
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate section of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202		3,957	110	3,847
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250		199,044	194,906	4,138
Nature of Debt (Purpose): Media				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				7,985
2) TOTAL This Period (last page this line only)				40,084
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2 and 3 and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 28 for
 LINE NUMBER 11-21
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044	none	11-05-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	
		530.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Willie D. Greer 115 Sycamore St. London, KY 40741	none	11-05-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$	
		260.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Elaine D. Korn 10 Swan Lake Drive Sumter, SC 29150	self	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$	
		250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harold K. Phillips 511 S. San Fernando Road Burbank, CA 91502	Pepperdine University	10-22-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation professor	Aggregate Year-to-Date—\$	
		1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. John G. Arnett, Jr. 7436 Burlington Pike Florence, KY 41042	self	10-30-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date—\$	
		500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. H. Lyle Duerson, Jr. 400 Pleasantview Avenue Louisville, KY 40206	Southern Optical	10-25-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/Optician	Aggregate Year-to-Date—\$	
		750.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Henry E Haller, Jr. 5023 Frew Ave Pittsburgh, PA 15213	Information Requested	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$	
		250.00	
SUBTOTAL of Receipts This Page (optional)			2000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 72
 LINE NUMBER 1113
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Charles Leibson 740 Zorn Avenue, #3J Louisville, KY 40206	self	10-29-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	600.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. William J. Receveur, Jr. 1324 Navajo Ct Louisville, KY 40207	Garst-Receveur	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Charles R. VanHoose 200 Steel Drive Pikeville, KY 41501	Self employed	11-07-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date-\$	230.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. William H. Baker 2319 Clarkswood Road Louisville, KY 40207	self	10-23-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$	1000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard C. Elliott 23 Harbor Island Newport Beach, CA 92660	R.C. Elliott Corporation	10-24-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Michael W. Hart P.O. Box 268 Corbin, KY 40701	Information Requested	10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Willard W. Lindsey 110 Pike Avenue Pikeville, KY 41501	self	11-15-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil Gas Developer and Operator	Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			2630.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 28 for
 LINE NUMBER 1175
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Mattie Lou Riley 417 West 12th Street Benton, KY 42025		Name of Employer none	Date (month, day, year) 11-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. John L. Warden 125 Broad Street New York, NY 10004		Name of Employer Information Requested	Date (month, day, year) 11-07-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Carlton Beal 104 S. Pecos Midland, TX 79701		Name of Employer self	Date (month, day, year) 11-02-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Petroleum engineer	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Arthur Farwell Box 11360 Tryon, NC 28782		Name of Employer	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Marguerite G. Lyons 618 - 15th Street Ashland, KY 41101		Name of Employer self employed	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Dr. James F. Williamson Ashland, KY 41101		Name of Employer self employed	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Medical Dr.	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Mr. Robert Bova 957 Turkeyfoot Road Lexington, KY 40502		Name of Employer Information Requested	Date (month, day, year) 11-08-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			3300.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard Fleischaker 2460 Liberty Tower P. O. Box 1178 Oklahoma City, OK 73101	Jolen Products	10-31-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board		
	Aggregate Year-to-Date-\$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul D Hinch 2431 E 61st., Suite 800 Tulsa, OK 74136	Self-employed	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real estate developer		
	Aggregate Year-to-Date-\$	250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Alice Sayre 1559 Colonial Terrace Arlington, VA 22209		10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date-\$	250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Jerry Zelman 960 Arthur Godfrey Road, Ste 401 Miami, FL 33140	self	10-31-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation doctor		
	Aggregate Year-to-Date-\$	250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Paul Burnam W. Main Street Richmond, KY 40475	self	11-19-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife		
	Aggregate Year-to-Date-\$	300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Otto M Fox, Jr. 301 N 21st St Montibello, CA 90640	First Interstate Mortgage	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP		
	Aggregate Year-to-Date-\$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ernest Meade 1001 Winchester Ave. Ashland, KY 41101	Hertz System Leasing-Self	11-05-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Rental		
	Aggregate Year-to-Date-\$	230.00	
SUBTOTAL of Receipts This Page (optional)			1350.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Theresa Shaw 9017 Cardiff Rd. Louisville, KY 40222		Jefferson Cnty. Government 10-23-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Land Aquis. Agent	
		Aggregate Year-to-Date-\$	260.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Howard E. Chappell P. O. Box 746 Hazard, KY 41701		Hazard Express, Inc. 10-26-84	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner/Trucking Company	
		Aggregate Year-to-Date-\$	1200.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Ottis H. Fultz Carter, KY 41128		Information Requested 11-05-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	
		Aggregate Year-to-Date-\$	325.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. John H. Hutchinson 8135 Lake Avenue Louisville, KY 40222		Jefferson County Government 10-24-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	
		Aggregate Year-to-Date-\$	275.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Elisha Mitchell Route 5 Box 312 Corbin, KY 40701		Information Requested 10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	
		Aggregate Year-to-Date-\$	500.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Charles H. Simpson 2775 Fairway Drive Baton Rouge, LA 70809		C.S. Industries 10-19-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	
		Aggregate Year-to-Date-\$	250.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. J. N. Clevenger 6536 High Drive Shawnee Mission, KS 66208		self 11-07-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	
		Aggregate Year-to-Date-\$	2000.00
SUBTOTAL of Receipts This Page (optional)			2100.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Alexander Gaston
Meadgate 101 Lewis St.**

Greenwich, CT 06830

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Occupation

Investor

Aggregate Year-to-Date-\$

750.00

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

B. Full Name, Mailing Address and ZIP Code

**Mr. R. D. Jennings
9243 Interline Avenue**

Baton Rouge, LA 70809

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Capital Valve & Fitting Co.

Occupation

president

Aggregate Year-to-Date-\$

500.00

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

500.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Arthur Musarra
1718 Statler Hilton**

Buffalo, NY 14202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Musarra & Musarra

Occupation

attorney

Aggregate Year-to-Date-\$

1000.00

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

**Mrs. Mildred Stanhagen
1261 East Edgemont**

Phoenix, AZ 85006

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

550.00

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Robert W. Corcoran
Box 186**

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Ag. Sales & Service

Occupation

partner

Aggregate Year-to-Date-\$

300.00

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

50.00

F. Full Name, Mailing Address and ZIP Code

**Mrs. James L. Gibson
1838 Yale Drive**

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Albert S. Kellow
1603 Avenue Plaza**

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

550.00

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Mary J Norgaard
 135 Arrowhead Lane

Haines City, FL 33844

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt this Period

250.00

Occupation

Housewife

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. John R Stocks
 4909 N Monroe St.

Tallahassee, FL 32303

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Coastal Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. A. Myers Davis
 395 Redding Rd. #68

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

750.00

Occupation

A. Myers Davis Dev. Co., Inc.

Aggregate Year-to-Date-\$

1500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Harry W Gorst
 6301 Quebec Dr.

Los Angeles, CA 90062

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. John B Kilroy, Jr.
 2230 E Imperial Hwy

El Segundo, CA 90245

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Real Estate Developer

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Max H. Pearson
 7400 Midlothian Pike

Richmond, VA 23225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Richmond Honda

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Ms. Alice Tatum
 515 Fountain Avenue

Georgetown, KY 40324

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1112
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Ann D. Aaron 599 Garden Drive Louisville, KY 40206		Name of Employer Information Requested	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt this Period 250.00
		Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Michael A. Dicken 307 Mackie Lane Louisville, KY 40216		Name of Employer self	Date (month, day, year) 10-18-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation CPA	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Mr. Willie D. Greer 115 Sycamore St. London, KY 40741		Name of Employer none	Date (month, day, year) 11-15-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 30.00
		Aggregate Year-to-Date-\$ 260.00	
D. Full Name, Mailing Address and ZIP Code Mr. George Krauser, Jr. 15 Chamberry Circle Louisville, KY 40207		Name of Employer Touche-Ross	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Accountant	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Dr. W. V. Pierce 822 North Ft. Thomas Avenue Fort Thomas, KY 41075		Name of Employer none	Date (month, day, year) 11-15-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired physician	Amount of Each Receipt This Period 30.00
		Aggregate Year-to-Date-\$ 270.00	
F. Full Name, Mailing Address and ZIP Code Mr. John G. Arnett, Jr. 7436 Burlington Pike Florence, KY 41042		Name of Employer self	Date (month, day, year) 11-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation attorney	Amount of Each Receipt This Period 400.00
		Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code SGM William J. Durr 062 30 9958 P. O. Box 700 Fort Campbell, KY 42223		Name of Employer U.S. Army	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SGM	Amount of Each Receipt This Period 40.00
		Aggregate Year-to-Date-\$ 225.00	
SUBTOTAL of Receipts This Page (optional)			2750.00
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Frederic C. Hamilton
1600 Broadway

Denver, CO 80202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hamilton Bros. Oil

Date (month,
day, year)

10-29-84

Amount of Each
Receipt this Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

450.00

B. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
1602 Gardiner Ln., #121

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Precision Tool Die Mach. Co, Inc

Date (month,
day, year)

11-02-84

Amount of Each
Receipt This Period

30.00

Occupation

Secretary & Treasurer

Aggregate Year-to-Date-\$

225.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gary Reece
P. O. Box 7

Annville, KY 40402

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Annville Trucking

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Manager

Aggregate Year-to-Date-\$

700.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Edith Mae VanHoose
Box 2319

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

200.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Trilby Ball
2124 Griffith Ave

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

60.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

410.00

F. Full Name, Mailing Address and ZIP Code

Mr. Charles F. Elmes
4475 North Ocean Blvd., Apt. 306

Delray Beach, FL 33444

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Dr. Daryl Harvey
Route 6, Box 1-C

Glasgow, KY 42141

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

200.00

Occupation

M. D.

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1490.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. M. R. Linnell
450 Maya Palm Drive
Boca Raton, FL 33432**

Name of Employer

Linnell & Co.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

500.00

Occupation

Real Estate Developer

Aggregate Year-to-Date-\$

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

B. Full Name, Mailing Address and ZIP Code

**Mr. Duane R. Roberts
P. O. Box 2447
Riverside, CA 92516**

Name of Employer

D. R. R. Investments

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

Investments

Aggregate Year-to-Date-\$

750.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

**Mr. Maxwell Belding
11 Meeting House Lane
Old Lyme, CT 06371**

Name of Employer

Equity Venture

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Real Estate

Aggregate Year-to-Date-\$

1000.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

**Mr. F. Evans Farwell
5824 St. Charles Avenue
New Orleans, LA 70115**

Name of Employer

Whitney Nat'l Bank

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

500.00

Occupation

Executive

Aggregate Year-to-Date-\$

1500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

**Mr. Fred Hervey
PO Box 20230
Phoenix, AZ 85036**

Name of Employer

Sun Publishing Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Exec.

Aggregate Year-to-Date-\$

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

**Mr. John Ruan
3200 Ruan Center
666 Grand Ave
Des Moines, IA 50309**

Name of Employer

The Ruan Companies

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

**Ms. Pauline E. Williman
447 Loudonville Road
Albany, NY 12211**

Name of Employer

Self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

short hand reporter

Aggregate Year-to-Date-\$

400.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Donald E. Bowles
Box 216

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-16-84

Amount of Each
Receipt this Period

100.00

Occupation

Coal Producer

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Edward Forbes
P. O. Box 3056

Vero Beach, FL 32963

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

American Ship Bldg. Co.

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

500.00

Occupation

Vice President

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Frank S. Hoag, Jr.
825 West 6th Street

Pueblo, CO 81002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Addison M. McConnell, Sr.
12 Sequoyah Dr.

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

1000.00

Occupation

Retired

Aggregate Year-to-Date-\$

1800.00

E. Full Name, Mailing Address and ZIP Code

Mr. Richard M. Scaife
Box 1138

Pittsburg, PA 15230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Tribune-Review

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Publisher

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Carl J. Zoeller
9011 Whipps Mill Rd.

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Masters Supply

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Exec./President

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Susan H. Calhoun
1107 Beech Road

Rosemont, PA 19010

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 12 of 72 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. William H G France PO Box K Daytona Beach, FL 32015	Name of Employer Int. Speedway	Date (month, day, year) 10-29-84	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Hazel S Howe Pleasant Point Cushing, ME 04563	Name of Employer self	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Ms. Aurora Meneses 400 E. Colonial Drive Orlando, FL 32803	Name of Employer self	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation self-employed	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Theresa Shaw 9017 Cardiff Rd. Louisville, KY 40222	Name of Employer Jefferson Cnty. Government	Date (month, day, year) 10-31-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Land Aquis. Agent	Aggregate Year-to-Date-\$ 260.00	
E. Full Name, Mailing Address and ZIP Code Mr. Charles L. Cherry 521 8th Avenue, NW Fayette, AL 35555	Name of Employer Charles L. Cherry & Assoc.	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Mr. Ying Saing Hwa 5437 Arrowhead Avenue Buena Park, CA 90621	Name of Employer Information Requested	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Nancy Mitchell 217 Hamlin Street Corbin, KY 40701	Name of Employer Information Requested	Date (month, day, year) 10-19-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			2050.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 13 of 72 for
 LINE NUMBER 11-12
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Harold S. Smith P. O. Box 1941 Naples, FL 33939	Information Requested	11-01-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. J. N. Clevenger 6536 High Drive Shawnee Mission, KS 66208	self	11-07-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	2000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Alexander Gaston Meadgate 101 Lewis St. Greenwich, CT 06830	Self-Employed	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date-\$	750.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. J. A. Johnson 128 De Mott Avenue Rockville Centre, NY 11570	Steamco Corp.	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Frank L. Stanonis, II 142 N. Arlington Drive Henderson, KY 42420	The Wiser Oil Co.	11-21-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Geologist	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Joseph C. Corradino 1505 Sylvan Court Louisville, KY 40205	self	10-23-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	2000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Russell J. Giganti 6901 E. 38th Street Indianapolis, IN 46226	Giganti Co.	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			3300.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 14 of 32 for
LINE NUMBER 11 (A)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Richard W. Kelly 123 South 20th Street Terre Haute, IN 47803	Name of Employer Bituminous Materials	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Jean S. Ogden 402 B Mockingbird Valley Road Louisville, KY 40207	Name of Employer self	Date (month, day, year) 10-26-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mrs. Gladys Stone 1506 Baptist Towers Louisville, KY 40203	Name of Employer none	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date—\$ 270.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Kate G. Davis 450 Swing Lane Louisville, KY 40207	Name of Employer self employed	Date (month, day, year) 10-23-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date—\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Eugene Goss Attorney-At-Law Harlan, KY 40831	Name of Employer self	Date (month, day, year) 10-23-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date—\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Mr. W. S. Kilroy 1908 First City Nat. Bank Bldg. Houston, TX 77002	Name of Employer self	Date (month, day, year) 11-02-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Kathleen Peck P.O. Box 130 Russell Springs, KY 42642	Name of Employer self	Date (month, day, year) 10-22-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 500.00	
SUBTOTAL of Receipts This Page (optional):			2600.00
TOTAL This Period (last page this line number only):			

SCHEDULE A

ITEMIZED RECEIPTS

Page 15 of 72 for
LINE NUMBER 114
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Frances K. Taylor 427 Helen Street Lake Charles, LA 70601		Name of Employer none	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
B. Full Name, Mailing Address and ZIP Code Dr. Phillip R. Aaron Columbia, KY 42728		Name of Employer self	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation physician	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code Mr. Thomas G Dickerson 2229 McClellan Parkway Sarasota, FL 33579		Name of Employer Self-Employed	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Doctor	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code Mr. James G. Grissom Route 1, Box 50G Edmond, OK 73034		Name of Employer Windy Meadows Showtime	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
E. Full Name, Mailing Address and ZIP Code Mr. Kenneth S Kroehler Rt. 2, Box 319C Highlands, NC 28741		Name of Employer Information Requested	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code Mr. Harry L. Pierson 2204 Comerica Bank Building Detroit, MI 48226		Name of Employer Information Requested	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
G. Full Name, Mailing Address and ZIP Code Mr. Edward D. Arnold 3758 S. Lakewood Drive Memphis, TN 38128		Name of Employer Retired	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			4250.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 16 of 72 (for
 LINE NUMBER 11 (2)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

SGM William J. Durr
 062 30 9958
 P. O. Box 700
 Fort Campbell, KY 42223

Name of Employer

U.S. Army

Date (month,
 day, year)

11-05-84

Amount of Each
 Receipt This Period

40.00

Occupation

SGM

Aggregate Year-to-Date-\$

225.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

B. Full Name, Mailing Address and ZIP Code

Mrs. Anna Emery Hanson
 400 Arlington Avenue

Name of Employer

self

Date (month,
 day, year)

10-31-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
 1602 Gardiner Ln., #121

Name of Employer

Precision Tool Die Mach. Co., Inc

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

30.00

Occupation

Secretary & Treasurer

Aggregate Year-to-Date-\$

225.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Mrs. Linda Reece
 P.O. Box 8

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Mr. Donald H. Vish
 1107 Richmond Road

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

900.00

Occupation

Attorney

Aggregate Year-to-Date-\$

900.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Mr. Estill Banks
 422 Cornelia Ave.

Name of Employer

Information Requested

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Mr. G. S. Elrod
 P. O. Box 246

Name of Employer

none

Date (month,
 day, year)

11-07-84

Amount of Each
 Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional).....

3470.00

TOTAL This Period (last page this line number only).....

SCHEDULE A

ITEMIZED RECEIPTS

Page 17 of 72 for
LINE NUMBER 11 (a)
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. T Mitchell Hastings, Jr.
PO Box 266

Dublin, NH 03444

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Communications consultant

Aggregate Year-to-Date—\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Robert F. Linton
P. O. Box 111

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date—\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Ernest V Roberts
8500 Steller Dr

Culver City, CA 90230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

E V Roberts Inc.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Owner

Aggregate Year-to-Date—\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Louis A. Weil
21 Ash Court

Lafayette, IN 47904

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date—\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Ms. Delores C. Bennett
607 N. Main Street

Tompkinsville, KY 42167

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

300.00

Occupation

none

Aggregate Year-to-Date—\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Fred M Fehsenfeld
PO Box 68123

Indianapolis, IN 46268

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Asphalt Materials & Construction

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

Chairman

Aggregate Year-to-Date—\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Frances Starks Heyburn
3918 Leland Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

300.00

Occupation

homemaker

Aggregate Year-to-Date—\$

300.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 18 of 72 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Hugh O. Maclellan 109 E. Brow Road Lookout Mountain, TN 37350		Name of Employer Provident Life-Acc. Ins. Co.	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chairman	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code Mr. William R Runnells, Jr. 1104 Laskin Road Virginia Beach, VA 23451		Name of Employer Information Requested	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code Mr. Robert H. Wood 502 Ridgewood Road Louisville, KY 40207		Name of Employer none	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code Mr. Charles C. Boyer 6804 Foxcroft Road Prospect, KY 40059		Name of Employer Information Requested	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$	500.00
E. Full Name, Mailing Address and ZIP Code Ms. Marion Forcht Scenic View Heights Corbin, KY 40701		Name of Employer Information Requested	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$	500.00
F. Full Name, Mailing Address and ZIP Code Mr. Wm Edward Hole 403 N Broadway Greenville, OH 45311		Name of Employer	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
G. Full Name, Mailing Address and ZIP Code Mrs. Julia S. McConnell 12 Sequoyah Drive Shelbyville, KY 40065		Name of Employer self	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	2000.00
SUBTOTAL of Receipts This Page (optional)			2850.00
TOTAL Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 10 of 72 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Mark Searce
P. O. Box 489

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

11-19-84

Amount of Each
Receipt this Period

50.00

Occupation

merchant

Aggregate Year-to-Date-\$

275.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thomas E. Carroll
P.O. Box 607

Monticello, KY 42633

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

50.00

Occupation

Attorney

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. R. A. Franzen
215 Coconut Palm Road

Boca Raton, FL 33452

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Dr. Robert S. Howell
3907 Old Brownsboro Rd

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jewish Hospital

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Leonard R. Short
Route 1

Hedden Road

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

50.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

210.00

F. Full Name, Mailing Address and ZIP Code

Mr. John E. Chowning
512 Fern Drive

Hollybrook Estates

Campbellsville, KY 42718

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Mayes, Gudderth & Etheredge, In.

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Senior Consultant

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. O W Hyde
1623 E 1080 N

Logan, UT 84321

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 20 of 32
 LINE NUMBER 11 (A)
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard E. Moore 6706 John Hancock Place Prospect, KY 40059	Porter Paint Company	10-26-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation General Management	Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Kathleen D. Smith 2436 Brentwood Houston, TX 77019	self	11-01-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	1000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Magda F. Colli P. O. Box 22340 UPL Station San Juan, Puerto Rico, PR 00931	University of Puerto Rico	11-01-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrator	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Dan Geiger 144 Whirlaway Trail Corbin, KY 40701	Information Requested	10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Samuel C. Johnson 4041 N. Main Street Racine, WI 53402	S C Johnson & Son Inc.	10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO	Aggregate Year-to-Date-\$	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. J. R. Stansbury Main at Fifth Street London, KY 40741	Lewis, Scoville, Scoville & Stay	11-13-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$	1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Charlotte C. Couch 6015 Pine Forest Houston, TX 77057	Information Requested	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	500.00
SUBTOTAL of Receipts This Page (optional)			3800.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 21 of 22 for
LINE NUMBER 3342
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Robert E. Gill
5812 Aura Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

200.00

Occupation

homemaker

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. C. Kelly, Jr.
2432 S. Gordon

Alvin, TX 77511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Jean S. Ogden
402 B Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Gladys Stone
1506 Baptist Towers

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$

270.00

E. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$

505.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Grace P. Gourley
4301 Breckenridge Lane

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

120.00

Occupation

homemaker

Aggregate Year-to-Date-\$

220.00

G. Full Name, Mailing Address and ZIP Code

Mr. Donald J. Perkins
Route #6
Highway 421
Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

1000.00

Occupation

Contractor

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 22 of 72 for
 LINE NUMBER 117A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Helen A Taylor 439 NE Lakeview Dr. Sebring, FL 33870		Name of Employer self	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period 250.00
B. Full Name, Mailing Address and ZIP Code Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501		Name of Employer Adams & Adams	Date (month, day, year) 11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation attorney	Amount of Each Receipt This Period 200.00
C. Full Name, Mailing Address and ZIP Code Mrs. W. David Disponett Route 1, Box 316 Highway 127 Lawrenceburg, KY 40342		Name of Employer self	Date (month, day, year) 10-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 250.00
D. Full Name, Mailing Address and ZIP Code Mr. Roy Guffey 1116 One Energy Square Dallas, TX 75206		Name of Employer Roy Guffey Oil Company	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
E. Full Name, Mailing Address and ZIP Code Mr. Michael J. Kull 9109 Collingwood Road Louisville, KY 40299		Name of Employer Druthers	Date (month, day, year) 11-09-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Restaurant Executive	Amount of Each Receipt This Period 30.00
F. Full Name, Mailing Address and ZIP Code Mr. Edward Poitevent 28th Floor 225 Baronne Street New Orleans, LA 70112		Name of Employer Self-Employed	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Amount of Each Receipt This Period 250.00
G. Full Name, Mailing Address and ZIP Code Dr. John E. Trevey 5241 Tates Creek Rd. Lexington, KY 40503		Name of Employer Self	Date (month, day, year) 11-15-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation M. D.	Amount of Each Receipt This Period 500.00
SUBTOTAL of Receipts This Page (optional):			1730.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 23 of 29 for
LINE NUMBER 11 (a)
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Kathleen B. Ashe
230 Peachtree Street
Suite 1100
Atlanta, GA 30303

Name of Employer

self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

SGM William J. Durr
062 30 9958
P. O. Box 700
Fort Campbell, KY 42223

Name of Employer

U.S. Army

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

50.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

SGM

Aggregate Year-to-Date-\$

225.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harold W. Hardy
P. O. Box 37

Name of Employer

Hardy's Funeral Home

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

100.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Funeral/Director

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
1602 Gardiner Ln., #121

Name of Employer

Precision Tool Die Mach. Co., Inc

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

30.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Secretary & Treasurer

Aggregate Year-to-Date-\$

225.00

E. Full Name, Mailing Address and ZIP Code

Mr. Walter S. Reichert
4909 E. Manslick Road

Name of Employer

E. I. DuPont

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

25.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Lab Tech

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Jack Voigt
2 Rio Vista Drive

Name of Employer

Self Employed

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Ins. Agent

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Ms. Mabel S. Barnett
954 Milford Lane

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL OF Receipts This Page (optional)

2705.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 24 of 79
 LINE NUMBER 11 (11)
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information obtained from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. William J. Engel
 6191 Inspiration Way

La Jolla, CA 92037

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

10-24-84

Amount of Each
 Receipt This Period

250.00

Occupation

physician

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Helen E. Hatcher
 The Lodge
 Highland Farms
 Black Mountain, NC 28711

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. George D. Lockhart
 1307 Commonwealth Bldg.

Pittsburgh, PA 15222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Esther S. K. Roberts
 253 Round Hill Road

Greenwich, CT 06830

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mr. John H. Wertz
 20762 Beach Blvd.

Rocky River, OH 44116

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Independent Explosives, Inc.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

250.00

Occupation

businessman

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Allen D. Berry, Jr.
 Route 7, Berry Chapel Road

Franklin, TN 37064

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Berry Wholesale Co.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Wholesaler

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. J. Smith Ferebee
 P.O. Box 8256

Richmond, VA 23226

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Equitable Life

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

250.00

Occupation

Consultant

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 25 of 72 for
LINE NUMBER 11.1a
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. R J Higginson
c/o Shagbark
Route 11, Whispering Oaks
Sevierville, TN 37862

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

Retired

Date (month,
day, year)

10-29-84

Amount of Each
Receipt this Period

250.00

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Bob Magness
4725 South Holly Street

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

TCI, Inc.

Occupation

director

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William R Runnells, Jr.
1104 Laskin Road

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

150.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Leon Woodrow
439 Meadow Lane

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Sellers Engineering Co.

Occupation

Vice President

Date (month,
day, year)

11-14-84

Amount of Each
Receipt This Period

50.00

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Merom Brachman
311 N. Drexel

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

F. Full Name, Mailing Address and ZIP Code

Mr. Duffy L. Ford
200 South Second Street

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

249.10

Occupation

C P A

Aggregate Year-to-Date-\$

749.10

G. Full Name, Mailing Address and ZIP Code

Mr. Robbie Holloway
12524 Renoir Lane

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Humble Exploration

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive VP

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2199.10

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 25 of 72
 LINE NUMBER 11
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Gordon McCoy P. O. Box 1146 Winnemucca, NE 89445	self	11-01-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation farmer	Aggregate Year-to-Date-\$	1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Roger Schoerner Route 9 Box 644 Carrollton, GA 30117	Southwire Co.	10-19-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Vice President	Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Thomas E. Carroll P.O. Box 607 Monticello, KY 42633	self	11-20-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Calvin W. Fraser 617 Kerry Lane McAllen, TX 78501	none	10-24-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Lucy Huddleston Route 1, Box 40 Nortonville, KY 42442	self	11-05-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$	235.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Jon T. Miho 190 S. King Street, #1500 Honolulu, HI 96813	Fong & Miho	11-05-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$	350.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Leonard R. Short Route 1 Hedden Road Versailles, KY 40383	Information Requested	11-15-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	210.00
SUBTOTAL of Receipts This Page (optional)			1780.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 27 of 33 for
 LINE NUMBER 11-62
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Barbara Bullitt Christian
 3601 Axton Lane
 Frogs Jump Skylight
 Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Investments

Aggregate Year-to-Date--\$

575.00

B. Full Name, Mailing Address and ZIP Code

Mr. Kenneth A Gablin
 6749 Towne Lane Rd.

McLean, VA 22101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Consulting Engineer

Aggregate Year-to-Date--\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. William H. Hyde
 2601 Via Ramon

Palos Verdes Estates, CA 90274

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date--\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Richard E. Moore
 6706 John Hancock Place

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Porter Paint Company

Date (month,
day, year)

11-14-84

Amount of Each
Receipt This Period

50.00

Occupation

General Management

Aggregate Year-to-Date--\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Sidney V. Smith
 1801 Main, Suite 600

Houston, TX 77002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Horne Co.

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

Vice Chairman

Aggregate Year-to-Date--\$

250.00

F. Full Name, Mailing Address and ZIP Code

Ms. Charlotte Collins
 1801 45th St., NW

Washington, DC 20007

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Roger McCormick Foundation

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date--\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth S. Geiger
 Box 321

Somerville, NJ 08876

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date--\$

250.00

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (a)
 (Use separate schedules for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth F. Jones
 1705 Lynn Way

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

100.00

Occupation

Administrator

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Samuel Stark
 2501 NW 75th St.

Miami, FL 33147

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Star Cem. Co.

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Exec.

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Fred H. Courtenay
 4003 Flint Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Hilliard, Lyons, Inc.

Date (month, day, year)

11-13-84

Amount of Each Receipt This Period

100.00

Occupation

Investment Counselor

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. E S Gillette, Jr.
 945 Green St.

San Francisco, CA 94133

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert E Kempf, Jr.
 515 Michigan Ave

Jeffersonville, IN 47130

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Exit Co.

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Henry Stratton
 PO Box 851

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Douglas Dean
 1630 Fincastle Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month, day, year)

10-26-84

Amount of Each Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1111
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (If Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Grace P. Gourley
4301 Breckenridge Lane**

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$

220.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Jimmy A. Kincer
15025 Bircham Road**

Louisville, KY 40243

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

87.50

Occupation

owner

Aggregate Year-to-Date-\$

1700.00

**In-kind
Office Equipment**

C. Full Name, Mailing Address and ZIP Code

**Ms. Rose M. Perkins
2587 Westmoreland**

Lexington, KY 40510

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

200.00

Occupation

Don Perkins & Assoc. Inc.

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

**Dr. John M. Templeton, Jr.
601 Pembroke Road**

Bryn Mawr, PA 19010

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

Occupation

physician

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

**Mrs. Norma B. Adams
P.O. Box 35**

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Adams & Adams

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

100.00

Occupation

attorney

Aggregate Year-to-Date-\$

525.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Chester A. Dixon
Box 970**

Hyden, KY 41749

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$

1030.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Harry E. Guyselman
1700 Wellington**

Lansing, MI 48910

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1337.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 30 of 72 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. David W. Potter		Information Requested	10-29-84
P. O. Box 2854		Occupation	Amount of Each Receipt this Period
Pikeville, KY 41501		Information Requested	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	500.00
<input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. John B. Ashmun		Wainoco Oil Corp.	11-05-84
1200 Smith, Suite 1500		Occupation	Amount of Each Receipt This Period
Houston, TX 77002		President	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	230.00
<input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Willard D. Eason		self	10-29-84
Box 595		Occupation	Amount of Each Receipt This Period
Nashville, IN 47448		Farmer	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	280.00
<input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Harold W. Hardy		Hardy's Funeral Home	11-14-84
P. O. Box 37		Occupation	Amount of Each Receipt This Period
Shepherdsville, KY 40165		Funeral/Director	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	250.00
<input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Chet Leonhardt		Information Requested	11-01-84
3049 Rolling Stone		Occupation	Amount of Each Receipt This Period
Oklahoma City, OK 73120		Information Requested	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	1000.00
<input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Jimmy Reliford		Jimmy Reliford Drilling Co.	10-29-84
Rt. 2 Box 619A		Occupation	Amount of Each Receipt This Period
Columbia, KY 42728		Drilling Contractor	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	1000.00
<input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mrs. Naomi C. Voyles		Self	11-13-84
2104 Eastern Parkway		Occupation	Amount of Each Receipt This Period
Louisville, KY 40204		Housewife	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate Year-to-Date-\$	350.00
<input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			2930.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11-751
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Debra Baron 1230 Liberty Bank Lane, Ste. 330 Louisville, KY 40222	self	10-31-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Nejat Erem 777 Washington Avenue Carlstadt, NJ 07072	Self	11-21-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Erskine D. Hawkins 1245 Lock Lomond Trail Atlanta, GA 30331	Southeast Training Corp.	11-13-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. William W Lockridge Route 1 McCracken Pike Lexington, KY 40383	Ashford Stud	10-19-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Partner	Aggregate Year-to-Date-\$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Herbert W. Robinson Box 17107 Fountain Hills, AZ 85268	IMS Corp.	10-29-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date-\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Sol West, III 10807 Bellagor Road Los Angeles, CA 90077	Information Requested	11-21-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Guy Bjorkman 645 Madison Avenue New York, NY 10022	none	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional)			4250.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (23)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Margaret L. Fields
7408 Dixie Highway

Florence, KY 41042

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

25.00

Occupation

Real Estate Broker

Aggregate Year-to-Date-\$

265.00

B. Full Name, Mailing Address and ZIP Code

Mr. Al G. Hill, Jr.
Thanksgiving Tower

Dallas, TX 75201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

oil producer

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Bob Magness
4725 South Holly Street

Englewood, CO 80111

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

TCI, Inc.

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

executive

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. H. Thomas Sanders, Jr.
Route #2

Smiths Grove, KY 42171

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mr. John W. Woods, III
2900 Cogan Street
P. O. Box 1270
Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

75.00

Occupation

Banker

Aggregate Year-to-Date-\$

225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Merom Brachman
311 N. Drexel

Columbus, OH 43209

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-08-84

Amount of Each
Receipt This Period

150.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. Stanley W. Hong
4563 Waikui St.

Honolulu, HI 96821

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hawaii Visitors Bureau

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

100.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 33 of 33 for
LINE NUMBER 11-84
(Use separate schedule for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Leonard McCoy 881 Corporate Drive Suite 206 Lexington, KY 40503		Name of Employer Information Requested	Date (month, day, year) 11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 200.00
B. Full Name, Mailing Address and ZIP Code Mr. James P. Schwartz 525 Heckor Avenue Metairie, LA 70005		Name of Employer Jimeo, Inc.	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chairman	Amount of Each Receipt This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Mrs. Stephen C. Casagrande 810 West Broadway Louisville, KY 40202		Name of Employer self	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation homemaker	Amount of Each Receipt This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Ms. Abigail G. Freed 2700 Virginia Ave. NW Watergate West Washington, DC 20037		Name of Employer Self-Employed	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Investor	Amount of Each Receipt This Period 250.00
E. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059		Name of Employer Self Employed	Date (month, day, year) 10-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Auto Dealer	Amount of Each Receipt This Period 50.00
F. Full Name, Mailing Address and ZIP Code Mr. Bernard Miller P. O. Box 1107 Fairbanks, AK 99707		Name of Employer self	Date (month, day, year) 11-07-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Business Advertising	Amount of Each Receipt This Period 1000.00
G. Full Name, Mailing Address and ZIP Code Mr. John E. Henley Shot, Jr. 4200 Country Club Drive Long Beach, CA 90807		Name of Employer self	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation investments	Amount of Each Receipt This Period 1000.00
SUBTOTAL of Receipts This Page (optional)			4500.00
TOTAL This Period (list page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1112
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Barbara Bullitt Christian
3601 Axton Lane
Frogs Jump Skylight
Prospect, KY 40059

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt this Period

25.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Investments

Aggregate Year-to-Date-\$

575.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Jeanette K. Gamble
710 S. Hanley Road
Apt. 12-D
St. Louis, MO 63105

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. J. Courtney Ivey
4739 S. Lake Drive
Delray Dunes
Boynton Beach, FL 33436

Name of Employer

none

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date-\$

280.00

D. Full Name, Mailing Address and ZIP Code

Mr. William B. Moore
400 Country Lane

Name of Employer

self

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

100.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Architect

Aggregate Year-to-Date-\$

265.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Alida S. Snow
P. O. Box 23

Name of Employer

C. S. Practioner

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Executive

Aggregate Year-to-Date-\$

750.00

F. Full Name, Mailing Address and ZIP Code

Mr. H. G. Gelhardt, III
20751 Sorolla Terrace

Name of Employer

MAC-USA, Inc.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Exec. Vice President

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Jennings A. Jones
204 Apollo Drive

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. W.T. Neal, Jr.
 P.O. Box 299

Brewton, AL 36427

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

T.R. Miller Mill Co. Inc

10-19-84

Occupation

Executive

Aggregate Year-to-Date-\$ 250.00

Amount of Each
 Receipt This Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thorton Stearns
 5 Fernway

Winchester, MA 01890

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Vacum Barrier Corp.

10-29-84

Occupation

President

Aggregate Year-to-Date-\$ 250.00

Amount of Each
 Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. W. H. Crain
 2511 San Gabriel Street

Austin, TX 78705

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

University of Texas

11-01-84

Occupation

Curator

Aggregate Year-to-Date-\$ 1000.00

Amount of Each
 Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. James S Gilmore, Jr.
 202 Michigan Bldg.

Kalamazoo, MI 49007

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jim Gilmore Enterprises

10-29-84

Occupation

CEO and Chairman

Aggregate Year-to-Date-\$ 250.00

Amount of Each
 Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Marron Kendrick
 398 Walsh Road

Atherton, CA 94025

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

10-31-84

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

Amount of Each
 Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Benedict V. Palmer-Ball, Sr.
 8203 Old Westport Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Palmer Products

11-09-84

Occupation

Production Mgr.

Aggregate Year-to-Date-\$ 210.00

Amount of Each
 Receipt This Period

30.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Mary C. Delaney
 805 Lincoln Highway

North Versailles, PA 15137

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

10-22-84

Occupation

homemaker

Aggregate Year-to-Date-\$ 210.00

Amount of Each
 Receipt This Period

100.00

SUBTOTAL of Receipts This Page (optional)

2130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Sloane Graff, Jr.
 3900 Barbour Ln.
 Box 22311
 Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

25.00

Occupation

retired

Aggregate Year-to-Date-\$

270.00

B. Full Name, Mailing Address and ZIP Code

Mr. Lloyd J. King
 5555 Bowles Lake Lane

Littleton, CO 80123

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

200.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

C. Full Name, Mailing Address and ZIP Code

Ms. Rose M. Perkins
 2587 Westmoreland

Lexington, KY 40510

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

11-16-84

Amount of Each
Receipt This Period

100.00

Occupation

Don Perkins & Assoc. Inc.

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Emanuel Turner
 111 Chateaux Dr

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Midland Glass Co

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Chairman & CEO

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Chester A. Dixon
 Box 970

Hyden, KY 41749

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-16-84

Amount of Each
Receipt This Period

100.00

Occupation

Retired

Aggregate Year-to-Date-\$

1030.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Pauline P. Hadley
 340 East 50th Street

New York, NY 10022

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

semi-retired

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Franklin T. Lambert
 2920 Rainbow Drive

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

1425.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Lee F. Powell 3649 Forest Circle Paducah, KY 42001		Old Hickory Clay Co.	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation mining Ceramic Clays	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$	350.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Barney Tucker 1628 Richmond Rd. Lexington, KY 40502		Top Yield, Inc.	11-13-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Business Executive	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. John D. Askew P. O. Box 1342 Fayetteville, AR 72702		Askew Enterprises	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Willard D. Eason Box 595 Nashville, IN 47448		self	11-15-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Farmer	Amount of Each Receipt This Period 30.00
		Aggregate Year-to-Date-\$	280.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Joseph L. Hargrove 700 Commercial Nat. Bank Bldg. Shreveport, LA 71101		Self-Employed	10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Oil & Gas Producer	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Lawrence Lewis 104 Bentley Avenue P. O. Box 180 Whitesburg, KY 41858		Self employed	11-13-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Grocer	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$	500.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. George R. Wackenhut 20 Casuarina Concourse Coral Gables, FL 33143		Information Requested	10-31-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			980.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Debra Baron 1230 Liberty Bank Lane, Ste. 330 Louisville, KY 40222	self	10-31-84	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George K. Erganian 7410 Central Avenue Indianapolis, IN 46240	self	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consulting engineer	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Lionel Hawse 701 Old Dobbin Road Lexington, KY 40502	self	10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date-\$ 750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. D. Covington Logan P. O. Box 4217 Louisville, KY 40204	Information Requested	10-26-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 330.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Augusta D. Roddis 1108 East Fourth Street Marshfield, WI 54449	none	10-24-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard White P. O. Box 546 Morehead, KY 40351	self-employed	10-23-84	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation businessman	Aggregate Year-to-Date-\$ 700.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. David S. Blue 301 E. Main Street Louisville, KY 40202	Louisville Scrap Material Co.,	11-09-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			2750.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Margaret L. Fields 7408 Dixie Highway Florence, KY 41042	Self	11-19-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Broker	Aggregate Year-to-Date-\$ 265.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James D. Hill 832 Kentucky Blvd. Hazard, KY 41701	Perry Oil Co., Inc.	10-22-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Gerald D. Mann 8102 Bayberry Court Indianapolis, IN 46250	Information Requested	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. H. Thomas Sanders, Jr. Route #2 Smiths Grove, KY 42171	Information Requested	11-01-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$ 350.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Wilmer R. Wright 6152 N. Verde Trail Apt D-101 Boca Raton, FL 33433	Wilmer Wright Assoc. Inc.	10-23-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Management Consultant	Aggregate Year-to-Date-\$ 380.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Arthur S. Brinkley, Jr. P.O. Box 1483 Richmond, VA 23212	virginia Capital Corp.	10-19-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Vice President	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Martha Murray Fortune 7650 W 96th St. Zionsville, IN 46077		10-29-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			2880.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Gordon H. Hood 142 Park Rd. Ft. Mitchell, KY 41011		Name of Employer Heckerman & Hood	Date (month, day, year) 10-30-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation lawyer	Amount of Each Receipt This Period 150.00
		Aggregate Year-to-Date-\$	450.00
B. Full Name, Mailing Address and ZIP Code Mr. Frank S McGehee 8112 Jose Circle W Jacksonville, FL 32217		Name of Employer Mac Papers Inc.	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code Ms. Mary Hugh Scott Suite 103 W. Thatcher Building Pueblo, CO 81003		Name of Employer Information Requested	Date (month, day, year) 11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$	500.00
D. Full Name, Mailing Address and ZIP Code Mr. H. J. Casey 6339 N. E. Sandy Blvd. Portland, OR 97213		Name of Employer Information Requested	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
E. Full Name, Mailing Address and ZIP Code Mr. Fred Friel, Jr. P.O. Box 7 Annapolis Junction, MD 20701		Name of Employer Bendix	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code Mr. Roy H. Hunt 1203 Park Hill Court Louisville, KY 40207		Name of Employer Hunt Trac & Equip. Co.	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation owner	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$	285.00
G. Full Name, Mailing Address and ZIP Code Mr. Donald Lane Miller Penny Cove Wicomico Church, VA 22579		Name of Employer Bruddock Publishing Co.	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			2450.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. James A. Shuffett
1200 Second National Plaza**

Lexington, KY 40507

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-26-84

Amount of Each
Receipt This Period

100.00

Occupation

Attorney

Aggregate Year-to-Date-\$

350.00

B. Full Name, Mailing Address and ZIP Code

**Mr. L. Wayne Cisney, Jr.
402 Paradise Street**

Greenville, KY 42345

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

(self) Cisney & Cisney

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$

350.00

C. Full Name, Mailing Address and ZIP Code

**Mr. George C. Garcia
#1 River Hill Road**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

**Mr. J. Courtney Ivey
4739 S. Lake Drive
Delray Dunes**

Boynton Beach, FL 33436

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-20-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$

280.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Wesley C. Morck
14 Old Military Road**

Hilton Head Island, SC 29928

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

**Dr. Henry S Spencer, MD
7702 Parham Road**

Richmond, VA 23229

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Lee Gentil
GPO Box 4804**

San Juan, PR 00936

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Boringuen Insulation Co., Inc.

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (A)
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Any Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Warren F. Jones
5636 Murietta Avenue**

Van Nuys, CA 91401

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-26-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

B. Full Name, Mailing Address and ZIP Code

**Mr. John T. Nelson
7647 National Turnpike**

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **600.00**

C. Full Name, Mailing Address and ZIP Code

**Mr. James Steinman
1822 N. Hi Mount Blvd.**

Milwaukee, WI 53208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

D. Full Name, Mailing Address and ZIP Code

**Mr. Calvin D. Cranfill
Box 2031**

Lexington, KY 40594

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Radwan & Cranfill

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

50.00

Occupation

CPA

Aggregate Year-to-Date-\$ **250.00**

E. Full Name, Mailing Address and ZIP Code

**Mr. Donald E. Girdler
551 Anderson Dr.**

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

F. Full Name, Mailing Address and ZIP Code

**Mr. Marron Kendrick
398 Walsh Road**

Atherton, CA 94025

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

750.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **1000.00**

G. Full Name, Mailing Address and ZIP Code

**Ms. Kathleen C. Parriott
2545 East 31st Street**

Tulsa, OK 74103

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **1000.00**

SUBTOTAL of Receipts This Page (optional)

3400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 43 of 43 for
LINE NUMBER 11-84
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Mary C. Delaney
805 Lincoln Highway

North Versailles, PA 15137

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-26-84

Amount of Each
Receipt This Period

10.00

Occupation

homemaker

Aggregate Year-to-Date-\$

210.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Mary S. Graham
10504 Florian Rd.

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date-\$

355.00

C. Full Name, Mailing Address and ZIP Code

Mr. Lloyd J. King
5555 Bowles Lake Lane

Littleton, CO 80123

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

D. Full Name, Mailing Address and ZIP Code

Mr. Will C. Perry
18630 Barbuda Lane

Houston, TX 77058

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. John Nay Thomas
P. O. Box 61

Longview, TX 75606

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

Investor

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. George E. Allen, Jr.
1809 Staples Mill Road

P. O. Box 6855

Richmond, VA 23230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Allen, Allen & Allen

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

Co-owner

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. William R. Doan
P. O. Box 222

Jackson, KY 41339

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

2160.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 44 of 72
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each category of receipts detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Otto V Haleck
 PO Box 99**

Pago Pago, Samoa, 96799

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Haleck West, Inc

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Russell Land
 101 North Porter Drive**

Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

11-13-84

Amount of Each Receipt This Period

50.00

Occupation

farmer

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

**Ms. Judith S. Raese
 233 Lebanon Street**

Morgantown, WV 26505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

**Dr. Than Tun
 P. O. Box 1116**

Wahiawa, HI 96786

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Raymond Eastburn
 2620 Cove Cay Drive #606**

Clearwater, FL 30520

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Dwight Harrigan
 PO Box 38**

Fulton, AL 36446

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Scotch Lumber Co.

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

VP

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. R A Lile
 1600 Tower Building**

Little Rock, AR 72201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Retired

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

TOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 45 of 72 for
 LINE NUMBER 12-12-84
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Brooks Walker, Jr. 615 Battery St., Suite 600 San Francisco, CA 94111	U.S. Leasing	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James H. Barr 218 Choctaw Road Louisville, KY 40207	Federal Government	10-31-84	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation U. S. Attorney	Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. J. T. Estes Box 26 Cantonment, FL 32533	Estates Forest Products	10-24-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Will H. Hays, Jr. 208 Union Federal Building Crawfordsville, IN 47933	self employed	10-24-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation writer	Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. D. Irving Long 2112 River Bluff Road Louisville, KY 40207	4th Ave. Corporation	10-24-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President-real Estate	Aggregate Year-to-Date-\$	400.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Carl G. Roth 13000 Osage Road Louisville, KY 40222	Ford Motor Company	10-25-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MFG. OPNS MGR. TRUCK OPNS	Aggregate Year-to-Date-\$	340.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Charles Whittingham 88 Lowell Ave Sierra Madre, CA 91024	Self-Employed	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owns/Trains Horses	Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			1350.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. James Martin Hill, Jr. 3244 Huntingdon Houston, TX 77091		Hill & White Apt. Builders	10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Amount of Each Receipt this Period 100.00
		Aggregate Year-to-Date-\$	350.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Lee Mattingly waiting Mike get correct address, KY 40000		Information Requested	10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 500.00
		Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. H. Thomas Sanders, Jr. Route #2 Smiths Grove, KY 42171		Information Requested	11-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$	350.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. William B. Yarmuth 142 Chenoweth Lane Louisville, KY 40207		Information Requested	10-23-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Dr. C. William Briscoe Rt 2, Box 307-C Fern Hill Corbin, KY 40701		Self	10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation M.D.	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$	350.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Ben B. Fowler 500 McClure Building Frankfort, KY 40601		self employed	10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	280.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Robert L. Hook 4114 Bardstown Road Louisville, KY 40218		self	11-13-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation car dealer	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$	300.00
SUBTOTAL of Receipts This Page (optional)			2100.00
TOTAL This Period (list page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11-721
(Use separate sheets for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Russell Scott, Jr. Suite 103 W. Thatcher Building Pueblo, CO 81003		Information Requested	11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Information Requested	500.00
		Aggregate Year-to-Date-\$	500.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. W. T. Cassels, Sr. P. O. Box 5887 Columbia, SC 29205		S. E. Freight Line	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Freight Transportation	500.00
		Aggregate Year-to-Date-\$	600.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. J. Burton Frierson 613 E. Brow Road Lookout Mountain, TN 37350		None	10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Retired	250.00
		Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Roy H. Hunt 1203 Park Hill Court Louisville, KY 40207		Hunt Trac & Equip. Co.	11-14-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		owner	35.00
		Aggregate Year-to-Date-\$	285.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Rowland D. Miller 6408 Longview Lane Louisville, KY 40222		self	10-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Architect	50.00
		Aggregate Year-to-Date-\$	280.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Charles J. Simas 42 Oxford Street Arlington, MA 02174		Information Requested	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Information Requested	1000.00
		Aggregate Year-to-Date-\$	1000.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. L. Wayne Cisney, Jr. 402 Paradise Street Greenville, KY 42345		(self) Cisney & Cisney	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Attorney	100.00
		Aggregate Year-to-Date-\$	350.00
SUBTOTAL of Receipts This Page (optional)			2435.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11-25
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. F. R. Gardner
 2199 Astor Street, #205**

Orange Park, FL 32073

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

10-24-84

Amount of Each
 Receipt This Period

250.00

Occupation

farmer

Aggregate Year-to-Date—\$

250.00

B. Full Name, Mailing Address and ZIP Code

**Dr. Jeanne Jaggard
 54 Stewart Street**

Passaic, NJ 07055

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date—\$

350.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Dan M. Morgan
 P.O. Box 999**

Jackson, MS 39205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

C L Morgan Estate

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

250.00

Occupation

Geologist

Aggregate Year-to-Date—\$

250.00

D. Full Name, Mailing Address and ZIP Code

**Dr. Dan M. Spengler
 5400 Stanford Drive**

Nashville, TN 37215

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

10-24-84

Amount of Each
 Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date—\$

250.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Arthur V. Geringer
 4611 Deseret Drive**

Woodland Hills, CA 91364

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date—\$

500.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Sholly Kagan
 P. O. Box 508**

Windham, NH 03087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

"I"

Date (month,
 day, year)

10-31-84

Amount of Each
 Receipt This Period

250.00

Occupation

COB

Aggregate Year-to-Date—\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. John T. Nelson
 7647 National Turnpike**

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

200.00

Occupation

Information Requested

Aggregate Year-to-Date—\$

600.00

SUBTOTAL of Receipts This Page (optional)

1950.00

TOTAL This Period (last page of this number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information obtained from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Arthur Stephens P. O. Box 307 Huntsville, AL 35804		Name of Employer Stevens, Millirons, & Harrison	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation attorney	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code Dr. James D. Crase 600 Little Creek Road Somerset, KY 42501		Name of Employer Self	Date (month, day, year) 10-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Doctor	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	500.00
C. Full Name, Mailing Address and ZIP Code Mr. C. Walter Glanz 2482 Bardstown Road Louisville, KY 40205		Name of Employer Glanz Plumbing & Heating	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Mechanical Contractor	Amount of Each Receipt This Period 100.00
		Aggregate Year-to-Date-\$	230.00
D. Full Name, Mailing Address and ZIP Code Mr. A. T. Kennedy P. O. Box 93406 Atlanta, GA 30377		Name of Employer Davidson-Ken Company	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code Ms. Jacque Parsley 215 Pleasantview Avenue Louisville, KY 40206		Name of Employer Information Requested	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
F. Full Name, Mailing Address and ZIP Code Mr. O. H. Delchamps, Jr. P.O. 1668 Mobile, AL 36601		Name of Employer Delchamps, Inc.	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Corp Exec.	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
G. Full Name, Mailing Address and ZIP Code Ms. Dorothy A Grant 955 Park Ave New York, NY 10028		Name of Employer Self-Employed	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Investments	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			2350.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 50 of 72 for
 LINE NUMBER 17 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information supplied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Norman V. Kinsey
 Suite 1805, Louisiana Tower
 401 Edwards Street
 Shreveport, LA 71101

Name of Employer

Kinsey Interest

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt this Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

president

Aggregate Year-to-Date—\$

500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Doris Petercheff
 Route 6 Box 186

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date—\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. J. H. Thornton
 2877 Iron Works Road

Name of Employer

Information Requested

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

1000.00

Georgetown, KY 40324

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date—\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Joseph A Allen
 882 Oak Ridge Road

Name of Employer

Duffs Quality Inn

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Winchester, VA 22601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

President

Aggregate Year-to-Date—\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Jeannette E. Donley
 3007 Jarvis Woods Court

Name of Employer

Wm.M.Mercer/Meidinger Inc.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

50.00

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Consultant

Aggregate Year-to-Date—\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. David V. Hall
 618 Hatherleigh Lane

Name of Employer

Cardinal Medical Corp.

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

1000.00

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Businessman

Aggregate Year-to-Date—\$

2000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth L. Lang
 P.O. Box 190

Name of Employer

self employed

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

500.00

Goshen, KY 40026

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Horsebreeder

Aggregate Year-to-Date—\$

525.00

SUBTOTAL of Receipts This Page (optional):

3550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 51 of 28
LINE NUMBER 11-15-84
(Use separate Schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Eugene C. Rainis Mountainside Road Mendham, NJ 07945		Brown Brothers	11-01-84 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	
		Aggregate Year-to-Date-\$	1000.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Charles Turner 1055 B. Peterson Louisville, KY 40214		none	11-01-84 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation retired	
		Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Miles A. Bailey, Jr. 9804 Reynolda Road Louisville, KY 40223		La-Z-Boy Showcase Shoppe	10-26-84 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	
		Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Bernard A. Egan 1900 Old Dixie Highway Fort Pierce, FL 33450		Egan, Fickett & Co.	10-22-84 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	
		Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Henry Upham Harris 55 Brookville Road Glen Head, NY 11545		none	10-29-84 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mrs. Marie B. Lynch 3818 Washington Sq. Apt. 11 Louisville, KY 40207		none	10-22-84 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation none	
		Aggregate Year-to-Date-\$	280.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt This Period
Mr. Peyton Reynolds Box 160 Whitesburg, KY 41858		self	11-15-84 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	
		Aggregate Year-to-Date-\$	250.00
SUBTOTAL of Receipts This Page (optional)			1950.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 52 of 73 for
 LINE NUMBER 11 (A)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Ellen Ruth Walker 317 North Country Club Drive Lantana, FL 33462	Name of Employer Information Requested	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. David M. Barrett 2555 M. Street, NW No. 100 Washington, DC 20037	Name of Employer Barrett & Hanna	Date (month, day, year) 11-21-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation partner	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. S. D. Falkenbury, Jr. P. O. Box 384 Concord, NC 28025	Name of Employer Clark Tribble, Harris	Date (month, day, year) 11-02-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date—\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mr. Vernon H. Heath 4725 Hibiscus Avenue Minneapolis, MN 55435	Name of Employer Rosemont, Inc.	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mrs. John H. Louis 1500 Sheridan Road Wilmette, IL 48127	Name of Employer self	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date—\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Mr. Carl G. Roth 13000 Osage Road Louisville, KY 40222	Name of Employer Ford Motor Company	Date (month, day, year) 11-13-84	Amount of Each Receipt This Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MEG. OPNS Mgr. Truck OPNS	Aggregate Year-to-Date—\$ 340.00	
G. Full Name, Mailing Address and ZIP Code Dr. Rudolf E. Wilhelm 6867 Parkway Circle Dearborn Heights, MI 48127	Name of Employer Self	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date—\$ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3040.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ralph L. Boling P. O. Box 247 Hawesville, KY 42348	Information Requested	11-01-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
	Aggregate Year-to-Date-\$	300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Albert Edward Fiorini 3004 Dunraven Court Louisville, KY 40222	Kentuckiana Trane Heating	11-09-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner and Operator		
	Aggregate Year-to-Date-\$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Daniel Hillenbrand 608 Edgewood Drive Batesville, IN 47006	Hillenbrand Industries	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date-\$	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. I. Sophie duPont May 801 Smith's Bridge Road Wilmington, DE 19807	self	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker		
	Aggregate Year-to-Date-\$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard A. Sanders Route 2 Smiths Grove, KY 42171	Edmonson County	10-29-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Court Clerk		
	Aggregate Year-to-Date-\$	230.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Geraldine B. Yenawine 1822 Tyler Parkway Louisville, KY 40204	Jefferson County Government	11-01-84	987.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Office Manager		
	Aggregate Year-to-Date-\$	1113.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. A. Kenneth Bunker 4809 Crofton Road Louisville, KY 40207	Touche Ross	10-25-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant		
	Aggregate Year-to-Date-\$	1000.00	
SUBTOTAL of Receipts This Page (optional)			3617.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ben B. Fowler 500 McClure Building Frankfort, KY 40601	self employed	11-15-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$	280.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Bruce H Hooper Matsonford Road, Suite 400 Two Radnor Corp Center Radnor, PA 19087	Hooper Bros. Co.	10-29-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investments	Aggregate Year-to-Date-\$	1000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard J. Sennott 451 Chapel Hill Lane Northfield, IL 33302	Ferguson Grain Co.	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Grain Merchant	Aggregate Year-to-Date-\$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Herbert Caudill 402 Mt. View Road Whitesburg, KY 41858	Caudill Lumber Co. Inc.	10-22-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	400.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. L. C. Fulenwider, Jr. 1125 17th Street, Suite 2500 Denver, CO 80202	L. C. Fulenwider Co.	10-31-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COB	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Thomas M. Hunt 3408 Lovers Lane Dallas, TX 75225	Hunt Petroleum Corp.	11-19-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil Man	Aggregate Year-to-Date-\$	300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Justine Milliken 627 Otis Boulevard P. O. Box 3167 Spartanburg, SC 29304	self	10-31-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$	1000.00
SUBTOTAL of Receipts This Page (optional)			2830.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Ms. Evelyn Simmons 1700 W. Wilshire Blvd. Oklahoma City, OK 73116		Name of Employer Jenkins Drilling & Pumpinb	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation office manager	Amount of Each Receipt this Period 250.00
		Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code Mrs. Jany M. Clanton Overbrook Road Mockingbird Valley Louisville, KY 40207		Name of Employer self employed	Date (month, day, year) 11-08-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Homemaker	Amount of Each Receipt This Period 200.00
		Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code Dr. Hoyt D. Gardner, Sr. 2707 Lamont Road Louisville, KY 40205		Name of Employer Self	Date (month, day, year) 11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation M. D.	Amount of Each Receipt This Period 300.00
		Aggregate Year-to-Date-\$	300.00
D. Full Name, Mailing Address and ZIP Code Mrs. Charles L. Jenkins 1700 West Wilshire Oklahoma City, OK 73116		Name of Employer Jenkins Drilling & Pump Company	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code Mr. Sammy J. Spradlin 1420 Fairway Dr. Ashland, KY 41101		Name of Employer Ashland Acoustical	Date (month, day, year) 11-05-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 50.00
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code Mr. Gerard E. Copelli 705 Wolfsnare Cresent Virginia Beach, VA 23454		Name of Employer Am. Ocean Cont. Corp.	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	280.00
G. Full Name, Mailing Address and ZIP Code Mr. Norman G. Germany P. O. Box 12266 Dallas, TX 75225		Name of Employer E. B. Germany & Sons	Date (month, day, year) 10-24-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	350.00
SUBTOTAL of Receipts This Page (optional)			1550.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 56 of 73 for
 LINE NUMBER 11 (2)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Morton Kasdan 600 Col. Anderson Pkwy. Louisville, KY 40222	Morton L. Kasdan, M.D., F.A.C.S.	10-29-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$	
		400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Sarah A. Stevens 346 Jesselin Drive Lexington, KY 40503		11-14-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date-\$	
		230.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Philip B Crosby PO Box 2369 Winter Park, FL 32790	Philip Crosby Assoc	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date-\$	
		250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Miss Marcella L. Glanz 2482 Bardstown Road Louisville, KY 40205	Glanz Plbg. and Htg. Inc.	10-29-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	
		280.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Wesley R Kewish 16 San Sebastian, Harbor Ridge Newport Beach, CA 92660	Rata Corp	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date-\$	
		250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Carl E. Patchin Clark Bldg, 115 South 6th Street Allison Park, PA 15101	Royal Oil & Gas GCo.	11-07-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$	
		1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. William Biggs Tabler, III 209 Blankenbaker Lane Louisville, KY 40207	Times Mirror Cable TV	10-19-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V. President	Aggregate Year-to-Date-\$	
		250.00	
SUBTOTAL of Receipts This Page (optional)			1830.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11123
(Use separate schedule(s) for each
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Summary Page)

Any Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044	Name of Employer none	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date--\$ 530.00	
B. Full Name, Mailing Address and ZIP Code Mr. James S. Greene, Jr. Box 995 Harlan, KY 40831	Name of Employer self	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date--\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Ms. Anna Knoop 725 F St. Marysville, CA 95901	Name of Employer Investments	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self employed	Aggregate Year-to-Date--\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mrs. O. S. Petty 101 East Kings Highway San Antonio, TX 78212	Name of Employer self	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date--\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Ms. Anna B. Toole 725 Center St. Central City, KY 42330	Name of Employer none	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation none	Aggregate Year-to-Date--\$ 400.00	
F. Full Name, Mailing Address and ZIP Code Mr. William E. Anderson, II 2579 Edgemoor Drive Lexington, KY 40510	Name of Employer Information Requested	Date (month, day, year) 10-19-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date--\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Dr. M. A. Douglass, Jr. P. O. Box 57 Magnolia, KY 42757	Name of Employer self	Date (month, day, year) 11-15-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation physician	Aggregate Year-to-Date--\$ 230.00	
SUBTOTAL of Receipts This Page (optional)			1800.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Henry S. Hall, Jr.
 154 Coolridge Hill

Cambridge, MA 02138

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. John M. Lang
 P. O. Box 764
 208 South Broad Street
 London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

600.00

C. Full Name, Mailing Address and ZIP Code

Mr. James E. Rarick
 19 South Country Lane

Village of Golf, FL 33436

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

None

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Harold R. Tyler, Jr.
 30 Rockefeller Plaza, Suite 36

New York, NY 10020

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

11-13-84

Amount of Each
 Receipt This Period

250.00

Occupation

lawyer

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Miles A. Bailey, Jr.
 9804 Reynolda Road

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

La-Z-Boy Showcase Shoppe

Date (month,
 day, year)

11-09-84

Amount of Each
 Receipt This Period

50.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Michael S. Egan
 2000 E. Oakland Park Blvd.

Fort Lauderdale, FL 33339

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dkbert Associates

Date (month,
 day, year)

11-07-84

Amount of Each
 Receipt This Period

250.00

Occupation

Partner

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. F. W. Harrison
 P. O. Box 51943

Lafayette, LA 70505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

Geologist

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (2)
 (Use separate schedules for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Willard W. Lindsey
 110 Pike Avenue**

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-22-84

Amount of Each Receipt This Period

50.00

Occupation

Oil Gas Developer and Operator

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Lucian A. Rice
 504a Hillcrest Drive**

Goldsboro, NC 27530

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Rouse & Co.

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

250.00

Occupation

Project Superintendent

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Kenneth G. Walker
 302 Pine Avenue**

Long Beach, CA 90812

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

250.00

Occupation

rancher

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

**Ms. Ruth Ann Barry
 6785 Winton Road**

Cincinnati, OH 45224

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Good Samaritan Hospital

Date (month, day, year)

11-05-84

Amount of Each Receipt This Period

1000.00

Occupation

Registered Nurse

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

**Mr. W. S. Farish
 P. O. Box 626**

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

11-02-84

Amount of Each Receipt This Period

1000.00

Occupation

Lane's End Farm

Aggregate Year-to-Date-\$

2000.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Arthur R. Heckerman
 2300 Central Trust Center**

Ft. Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Heckerman and Hood

Date (month, day, year)

10-30-84

Amount of Each Receipt This Period

300.00

Occupation

Attorney

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

**Mr. Thomas Allen Lupton, Jr.
 1201 Tallan Bldg.**

Chattanooga, TN 37401

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Stone Fort Land Co.

Date (month, day, year)

10-22-84

Amount of Each Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. G. Hunt Rounsavall 5405 Pueblo Road Louisville, KY 40207	Dixie Warehouse	10-30-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date-\$	275.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George Willett P. O. Box 792 Huron, CA 93234	Information Requested	11-01-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Ralph L. Boling P. O. Box 247 Hawesville, KY 42348	Information Requested	11-21-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date-\$	300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Curtis J. Flanagan P. O. Box 14186 Fort Lauderdale, FL 33302	So. FL Path. Society	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pathologist	Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Kurt Hillgruber PO Box 1190 Santa Monica, CA 90406	Hillgruber Investment	10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Morris McBride P. O. Box 1134 Paducah, KY 42001	self	11-15-84	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation realtor	Aggregate Year-to-Date-\$	210.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Richard A. Sanders Route 2 Smiths Grove, KY 42171	Edmonson County	11-01-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Court Clerk	Aggregate Year-to-Date-\$	230.00
SUBTOTAL of Receipts This Page (optional)			1030.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Geraldine B. Yenawine
 1822 Tyler Parkway

Louisville, KY 40204

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month,
day, year)

11-01-84

Amount of Each
Receipt this Period

13.00

Occupation

Office Manager

Aggregate Year-to-Date-\$

1113.00

B. Full Name, Mailing Address and ZIP Code

Mr. Hibbard Burke, Jr.
 Route 2, Box 362F

Jenkins, KY 41537

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date-\$

285.00

C. Full Name, Mailing Address and ZIP Code

Mr. J A Fowler, Jr.
 5 Huyler Road

East Setauket, NY 11733

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Retired

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Robert B. Horner
 4001 Glenarm Road

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

300.00

Occupation

farmer

Aggregate Year-to-Date-\$

700.00

E. Full Name, Mailing Address and ZIP Code

Mr. Wilson D. McRae
 P. O. Box 907

Marianna, FL 32446

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. E. L. Shannon, Jr.
 1000 S. Fremont Avenue

Alhambra, CA 91802

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Herbert Caudill
 402 Mt. View Road

Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Caudill Lumber Co., Inc.

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

100.00

Occupation

President

Aggregate Year-to-Date-\$

400.00

SUBTOTAL of Receipts This Page (optional)

1513.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (11)
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Thomas Fuller 3018 Springcrest Drive Louisville, KY 40222	Name of Employer Thomas Industries	Date (month, day, year) 10-19-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date—\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Frederick Hurd 200 East 66th Street New York, NY 10021	Name of Employer none	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Dr. Lawrence T. Minish, Jr. 6 River Hill Road Louisville, KY 40207	Name of Employer none	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D. Retired	Aggregate Year-to-Date—\$ 400.00	
D. Full Name, Mailing Address and ZIP Code Mr. John W. Simmons 384 Meadow Grove Flintridge, CA 91011	Name of Employer Information Requested	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mr. Sherman E. Clark P.O. Box 268 London, KY 40741	Name of Employer Information Requested	Date (month, day, year) 10-19-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date—\$ 500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Jacob V. Garner Route 3, Box 488 Somerset, KY 42501	Name of Employer none	Date (month, day, year) 10-24-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Louis J. Jenn 8900 Keystone Crossing #401 Indianapolis, IN 46240	Name of Employer Atrium Structures, Inc.	Date (month, day, year) 10-22-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date—\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			2850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Sammy J. Spradlin
1420 Fairway Dr.

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Ashland Acoustical

Date (month,
day, year)

11-16-84

Amount of Each
Receipt this Period

50.00

Occupation
President

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Gerard E. Copelli
705 Wolfsnare Crescent

Virginia Beach, VA 23454

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Am. Ocean Cont. Corp.

Date (month,
day, year)

11-16-84

Amount of Each
Receipt This Period

30.00

Occupation
President

Aggregate Year-to-Date-\$ 280.00

C. Full Name, Mailing Address and ZIP Code

Mr. Eldridge T. Gerry
59 Wall Street

New York, NY 10005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation
Information Requested

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Thomas N Kearns
850 Pembroke Road

Hollywood, FL 33021

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Meekins, Inc.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation
President

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. B.D. Newman
P.O. Box 2444

Newport News, VA 23602

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Newman AMC Jeep/Renault

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Occupation
President

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. C. Hobart Stevenson
4103 Calle Abril

San Clemente, CA 92672

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation
retired

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Walden Cuddy
Box 168

Millstone, KY 41838

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

grocery store

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

30.00

Occupation
owner

Aggregate Year-to-Date-\$ 280.00

SUBTOTAL of Receipts This Page (optional)

2110.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS

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 LINE NUMBER 11(a)
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Donald G. Glascoff, Jr. 1 Wall Street New York, NY 10005		Information Requested	10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Information Requested	250.00
		Aggregate Year-to-Date--\$	250.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. George A. Kiehn 2011 W. Lincoln Road Stockton, CA 95207		Keen Graphics	10-31-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Partner	250.00
		Aggregate Year-to-Date--\$	250.00
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. Dennis R. Patrick Route 4 Box 890 Williamsburg, KY 40769		Whitley County	11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		County Circuit Clerk	500.00
		Aggregate Year-to-Date--\$	500.00
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. William Biggs Tabler, III 209 Blankenbaker Lane Louisville, KY 40207		Times Mirror Cable TV	11-14-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		V. President	100.00
		Aggregate Year-to-Date--\$	250.00
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044		none	10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		homemaker	100.00
		Aggregate Year-to-Date--\$	530.00
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Mr. John S. Greenebaum 2233 Douglass Blvd. Louisville, KY 40205		Self-employed	11-08-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Attorney	1000.00
		Aggregate Year-to-Date--\$	1000.00
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
J Komes 2006 Washington St San Francisco, CA 94109		Self-Employed	10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Consultant	250.00
		Aggregate Year-to-Date--\$	250.00
SUBTOTAL of Receipts This Page (optional)			2450.00
TOTAL This Period (last page this line number only)			

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. O. S. Petty 101 Zast Kings Highway San Antonio, TX 78212	Information Requested	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Information Requested	
		Aggregate Year-to-Date-\$	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Anna B. Toole 725 Center St. Central City, KY 42330	none	11-05-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	none	
		Aggregate Year-to-Date-\$	400.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Paul E. Arneson 1101 Connecticut Avenue, NW Washington, DC 20036	Williams & Jensen	11-07-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Lawyer	
		Aggregate Year-to-Date-\$	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Mary E. Dudla 34 Werner Road Clifton Park, NY 12065	NE Professional Services	11-01-84	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	RN	
		Aggregate Year-to-Date-\$	2000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Judy Hall 618 Hatherleigh Lane Louisville, KY 40222	self	10-25-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	homemaker	
		Aggregate Year-to-Date-\$	2000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Oliver Langenberg 1 North Jefferson Saint Louis, MO 63103	Information Requested	11-01-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Stockbroker	
		Aggregate Year-to-Date-\$	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. William J. Receveur, III 27 Stone Bridge Louisville, KY 40207	Garst-Receveur	11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Construction Ex.	
		Aggregate Year-to-Date-\$	500.00
SUBTOTAL of Receipts This Page (optional)			4850.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 66 of 72 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Richard M. Baker
2534 Rocky Ridge Road

Birmingham, AL 35243

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Residential Land Inc.

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date--\$

500.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. E. Eison
45 Salisbury

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Western KY Energy Equip

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

200.00

Occupation

salesman

Aggregate Year-to-Date--\$

400.00

C. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date--\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Willard W. Lindsey
110 Pike Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

50.00

Occupation

Oil Gas Developer and Operator

Aggregate Year-to-Date--\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Edwin W. Rickert
56 Dogwood Lane

Rockville Centre, NY 11570

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brundage, Story, & Rose

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Sr. Investment Consultant

Aggregate Year-to-Date--\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Nicholas B. Wallace
616 Fifth

Fort Lauderdale, FL 33304

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

ESM Group Inc.

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date--\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. David E. Bartley
7611 Greenlawn Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Coopers & Lybrand CPA's

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

30.00

Occupation

CPA

Aggregate Year-to-Date--\$

230.00

SUBTOTAL of Receipts This Page (optional)

1330.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 67 of 72 for
LINE NUMBER 11 (a)
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. James E. Farmer
5128 Bardstown Road

Louisville, KY 40291

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

11-05-84

Amount of Each
Receipt this Period

30.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 205.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Mary Kay Hemmer
8906 Cromwell Hill Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gerald E. Lyons
618 - 15th Street

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. G. Hunt Rounsavall
5405 Pueblo Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dixie Warehouse

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

200.00

Occupation

Executive

Aggregate Year-to-Date-\$ 275.00

E. Full Name, Mailing Address and ZIP Code

Ms. Mamie L. Williams
1503 Quincy Street

Topeka, KS 66612

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Henry S. Booth
700 Cranbrook Road

Bloomfield Hills, MI 48013

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. S Douglas Fleet
1011 E Main St., Room 211

Richmond, VA 23219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

BFS Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Partner

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

2830.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
(Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. John P. Himes 708 Third Avenue #3505 New York, NY 10017	Name of Employer none	Date (month, day, year) 10-31-84	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Henry F. McCamish, Jr. Tower Place - Suite 2900 3340 Peachtree Road N.W. Atlanta, GA 30026	Name of Employer Management Comp. Group SE Inc.	Date (month, day, year) 10-19-84	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date-\$ 300.00	
C. Full Name, Mailing Address and ZIP Code Mrs. E. J. Sansome waiting Mike get correct address, KY 40000	Name of Employer self	Date (month, day, year) 11-01-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Dr. Lloyd G. Yopp 517 Briar Hill Road Louisville, KY 40206	Name of Employer self	Date (month, day, year) 10-25-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.	Aggregate Year-to-Date-\$ 300.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Paul Burnam W. Main Street Richmond, KY 40475	Name of Employer self	Date (month, day, year) 10-26-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 300.00	
F. Full Name, Mailing Address and ZIP Code Mr. Newell Fox 8800 Denington Drive Louisville, KY 40222	Name of Employer Burger King Franchise	Date (month, day, year) 10-26-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restauranteer	Aggregate Year-to-Date-\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Mr. W. James Host c/o Host & Associates 120 Kentucky Ave. Lexington, KY 40502	Name of Employer Host Communications, Inc.	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 1500.00	
SUBTOTAL of Receipts This Page (optional)			2650.00
TOTAL This Period (list page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (for
this separate schedule) for each
category of the Detailed
Summary Page

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ernest Meade
1001 Winchester Ave.

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hertz System Leasing-Self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

50.00

Occupation

Auto Rental

Aggregate Year-to-Date-\$

230.00

B. Full Name, Mailing Address and ZIP Code

Mr. Bayard Sharp
Box 3779

Greenville, DE 19807

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-02-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Howard E. Chappell
P. O. Box 746

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hazard Express, Inc.

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

900.00

Occupation

Owner/Trucking Company

Aggregate Year-to-Date-\$

1200.00

D. Full Name, Mailing Address and ZIP Code

Mr. Ottis H. Fultz

Carter, KY 41128

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

325.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Martha W Hurd
115 Lexford Road

Piedmont, CA 94611

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Housewife

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Dr. Lawrence T. Minish, Jr.
6 River Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

M.D. Retired

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. A. M. Simon
485 Park Avenue

New York, NY 10022

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (a)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Dorothy N. Clay 139 Sagamore Road Louisville, KY 40207	none	10-23-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Horace Garrett 715 Edwards Blvd. Big Spring, TX 79730	self	11-07-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harold C. Jennings 14835 Hagar Street Mission Hills, CA 91345	none	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Charles E. Mullen Route 11, 160 Jessamine Paducah, KY 42001	Chuck Mullen Olds Inc.	10-23-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Car dealer	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Mildred Stanhagen 1261 East Edgemont Phoenix, AZ 85006	none	10-24-84	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date-\$ 550.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Robert W. Corcoran Box 186 Danville, KY 40422	Ag. Sales & Service	11-05-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation partner	Aggregate Year-to-Date-\$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. George W. Gibson 36 Washington Street Wellesley, MA 02181	DeLand, Gibson, Meade & Gale, I.	10-22-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional)			1700.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 2112
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Charlean Keller 1806 S. Mariposa Billings, MT 59102		Name of Employer Kellerentp.	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
B. Full Name, Mailing Address and ZIP Code Mr. J. Larry Nichols 1500 Mid America Tower Oklahoma City, OK 73102		Name of Employer Information Requested	Date (month, day, year) 11-01-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	1000.00
C. Full Name, Mailing Address and ZIP Code Ms. Mary T. Stewart P.O. Box 2215 Palm Beach, FL 33480		Name of Employer self	Date (month, day, year) 10-19-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period 300.00
		Aggregate Year-to-Date-\$	300.00
D. Full Name, Mailing Address and ZIP Code Ms. Marlene K Glasscock 6603 Lovington Dallas, TX 75252		Name of Employer self	Date (month, day, year) 10-29-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
E. Full Name, Mailing Address and ZIP Code Mr. J. R. Kiely 206 Manzanita Way Redwood City, CA 94062		Name of Employer Bechtel Power Corp.	Date (month, day, year) 11-07-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Amount of Each Receipt This Period 250.00
		Aggregate Year-to-Date-\$	250.00
F. Full Name, Mailing Address and ZIP Code Mr. James A. Patterson, II 10000 Shelbyville Road, Ste 100 Anchorage, KY 40223		Name of Employer self	Date (month, day, year) 10-25-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation businessman	Amount of Each Receipt This Period 1000.00
		Aggregate Year-to-Date-\$	2000.00
G. Full Name, Mailing Address and ZIP Code Mr. Roger F. Tarter P.O. Box 10 Dunnville, KY 42528		Name of Employer Information Requested	Date (month, day, year) 10-22-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Amount of Each Receipt This Period 900.00
		Aggregate Year-to-Date-\$	1050.00
SUBTOTAL of Receipts This Page (optional)			3950.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (H)
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Ruth Dewey
Route 1, Sledd Creek**

Gilbertsville, KY 42044

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$

530.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Elmo Greer
P.O. Box 730**

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Corbin Deposit Bank

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

75.00

Occupation

banker

Aggregate Year-to-Date-\$

325.00

C. Full Name, Mailing Address and ZIP Code

**Mrs. Sarah Korein
240 Central Park S.**

New York, NY 10003

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1100.00

D. Full Name, Mailing Address and ZIP Code

**Mr. Fred Pfeiffer, Jr.
740 Zorn Avenue, #2J**

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-14-84

Amount of Each
Receipt This Period

200.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

**Ms. Elizabeth T. Trader
P. O. Box 276**

Providence, KY 42450

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Independent Investor

Aggregate Year-to-Date-\$

220.00

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

1475.00

TOTAL This Period (last page this line number only)

178591.60

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11-11
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code Henry Co. GOP c/o Frank E. Doll, Treasurer Carrollton Road Campbellburg, KY 40011 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 10-29-84 Amount of Each Receipt this Period 30.00
B. Full Name, Mailing Address and ZIP Code Rowan County Rep. Committee Route 5, Box 185-1 Morehead, KY 40351 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 10-23-84 Amount of Each Receipt This Period 151.90
C. Full Name, Mailing Address and ZIP Code Webster Co. Rep. Womens Club c/o Helen Fryer, Sec. Treasurer Route 1 Clay, KY 42404 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 10-22-84 Amount of Each Receipt This Period 20.00
D. Full Name, Mailing Address and ZIP Code Oldham CO. Rep. Women's Club c/o Mrs. Donald Rice 1500 Halls Hill Road Crestwood, KY 40014 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 11-02-84 Amount of Each Receipt This Period 100.00
E. Full Name, Mailing Address and ZIP Code Suburban Women's Republican Club c/o Republican Headquarters 3rd and Chestnut Streets Louisville, KY 40202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 10-23-84 Amount of Each Receipt This Period 100.00
F. Full Name, Mailing Address and ZIP Code Morgan Co. Republican Club C/O Donald C. Burton, Treasurer 460 Riverside West Liberty, KY 41472 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 11-01-84 Amount of Each Receipt This Period 244.20
G. Full Name, Mailing Address and ZIP Code Cumberland Co. Rep. Organization C/O Lanny Judd, Treasurer Burkesville, KY 42717 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Occupation Aggregate Year-to-Date—\$	Date (month, day, year) 10-22-84 Amount of Each Receipt This Period 1000.00
SUBTOTAL of Receipts This Page (optional)			1646.10
TOTAL This Period (last page this line number only)			1646.10

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 5 for
 LINE NUMBER 11 (c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information supplied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (In Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Trammell Crow Partners-PAC C/O J. McDonald Williams 3500 LTV Ct. 2001 Ross Avenue Dallas, TX 75201	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		11-01-84	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	500.00	
B. Full Name, Mailing Address and ZIP Code House Political Action Committee 2700 Snaders Road Prospect Heights, IL 60070	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10-29-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	250.00	
C. Full Name, Mailing Address and ZIP Code Trans National Employees PAC c/o Jim Wells, Treasurer 1254 Industry Road Lexington, KY 40505	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10-26-84	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	100.00	
D. Full Name, Mailing Address and ZIP Code MESA PAC c/o Boone Pickens, Jr. P. O. Box 15007 Amarillo, TX 79105	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10-29-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	1000.00	
E. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority c/o Robert Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		11-05-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	3526.96	
F. Full Name, Mailing Address and ZIP Code Trans Technology 123 North Pitt Street Alexandria, VA 22314	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10-19-84	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	250.00	
G. Full Name, Mailing Address and ZIP Code Meridian Bancorp, Inc. PAC C/O Clair A. Snyder, Chairman P. O. Box 1102 Reading, PA 19603	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10-22-84	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$	200.00	
SUBTOTAL of Receipts This Page (optional)			3300.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 5 for
 LINE NUMBER 11-62
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority c/o Robert Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002	Name of Employer	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 3526.96	
B. Full Name, Mailing Address and ZIP Code Nat. Screw Mach. Prod. Assn. PAC 6700 W. Snowville Road Brecksville, OH 44141	Name of Employer	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Kimberly-Clark Good Government Committee Neenah, WI 54956	Name of Employer	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 500.00	
D. Full Name, Mailing Address and ZIP Code National Conservative PAC c/o Brad Zerbe, Political Dir. 1001 Prince Street Alexandria, VA 22314	Name of Employer	Date (month, day, year) 11-07-84	Amount of Each Receipt This Period 2628.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 2628.00	
E. Full Name, Mailing Address and ZIP Code LENPAC c/o Mr. Burt Kennan, Chairman P. O. Box 6276 Metairie, LA 70009	Name of Employer	Date (month, day, year) 10-31-84	Amount of Each Receipt This Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 5000.00	
F. Full Name, Mailing Address and ZIP Code True Responsible Government Com. c/o C. H. Breed, Chairman P. O. Box Drawer 2360 Casper, WY 82602	Name of Employer	Date (month, day, year) 10-22-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 100.00	
G. Full Name, Mailing Address and ZIP Code Forest Political Action Comm. C/O W. Jeffrey Buford, Chairman 1500 Col. Nat. Bldg. 950-17th St Denver, CO 80202	Name of Employer	Date (month, day, year) 10-18-84	Amount of Each Receipt This Period 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$ 750.00	
SUBTOTAL of Receipts This Page (optional)			10978.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 5
 LINE NUMBER 11-11
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Congressional Majority Committee
 2030 N. 16th Street, Suite 305

Arlington, VA 22201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

200.00

B. Full Name, Mailing Address and ZIP Code

Rep. Congressional Boosters Club
 c/o Ms. Beebe Bourne
 300 First Street, S. E.
 Washington, DC 20003

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

11-13-84

Amount of Each Receipt This Period

2000.00

C. Full Name, Mailing Address and ZIP Code

Cooper Laboratories, Inc. PAC
 c/o Parker Montgomery, Chairman
 1901 Ave. of the Stars, Ste. 1422
 Los Angeles, CA 90067

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Sun PAC
 C/O David Twomey, Adm. Director
 1100 Matsonford Road
 Radnor, PA 19087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

10-19-84

Amount of Each Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Auto Dealers and Drivers For
 Free Trade Political Action Com.
 153-12 Hillside Avenue
 Jamaica, NY 11435

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

11-19-84

Amount of Each Receipt This Period

2500.00

F. Full Name, Mailing Address and ZIP Code

Revere Copper & Brass Employ. PAC
 c/o Mr. John Wherry
 P. O. Box 218
 Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

10-25-84

Amount of Each Receipt This Period

650.00

G. Full Name, Mailing Address and ZIP Code

Blue Bell Employees' PAC
 c/o David Prince
 P. O. Box 21488
 Greensboro, NC 27420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

7850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 5 for
LINE NUMBER 1120
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Figgle International Employees
Better Government Committee
1000 Virginia Center Parkway
Richmond, VA 23295

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-25-84

300.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 800.00

B. Full Name, Mailing Address and ZIP Code

McGraw-Edison Company PAC
c/o Nancy H. Yde, Treasurer
1 Continental Tow. 1701 Golf Rd.
Rolling Meadows, IL 60008

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-22-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1500.00

C. Full Name, Mailing Address and ZIP Code

Coopers & Lybrand PAC
1800 M. Street, NW

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-01-84

83.33

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 83.33

D. Full Name, Mailing Address and ZIP Code

Sun PAC
C/O David Twomey, Adm. Director
100 Matsonford Road
Radnor, PA 19087

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-29-84

1500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 3000.00

E. Full Name, Mailing Address and ZIP Code

McGraw-Edison Company PAC
c/o Nancy H. Yde, Treasurer
1 Continental Tow. 1701 Golf Rd.
Rolling Meadows, IL 60008

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-01-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1500.00

F. Full Name, Mailing Address and ZIP Code

New Leadership Fund
C/ O. Glenn S. Gertell, Chairman
P. O. Box 1890
Washington, DC 20013

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-23-84

100.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 100.00

G. Full Name, Mailing Address and ZIP Code

Motorola Emp. Good Govt. Fund
C/O Bruce Ladd, Director
1776 K Street, N. W.
Washington, DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-25-84

2000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 4000.00

SUBTOTAL of Receipts This Page (optional)

5483.33

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 5 for
 LINE NUMBER 11
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code UPSPAC C/O Samuel A. Lockwood 51 Weaver St. Greenwich Of. Park 5 Greenwich, CT 06830	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 2000.00
	Occupation	11-02-84	
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date—\$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUMTOTAL of Receipts This Page (optional)			2000.00
TOTAL This Period (last page this line number only)			29611.33

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 1369
 (Use separate schedule for each
 category of this detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Judge A. Mitchell McConnell, Jr. 3 Gardiner Court Louisville, KY 40205		Name of Employer	Date (month, day, year) 10-26-84
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period 15000.00
		Aggregate Year-to-Date-\$	40000.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date-\$	
SUBTOTAL of Receipts This Page (optional)			15000.00
TOTAL This Period (last page this line number only)			15000.00

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 13a
(Use separate schedules
for each numbered line)

Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code of Loan Source Mitch McConnell 3 Gardiner Court Louisville, Kentucky 40205	Original Amount of Loan 15,000	Cumulative Payment To Date 15,000	Balance Outstanding at Close of This Period 0
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10-26-84</u> Date Due <u>None</u> Interest Rate <u>None % (apr)</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Original Amount of Loan		Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period (This Page optional)			
TOTALS This Period (last page in this file only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

84020280964

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 14
 (Use separate schedules for each
 category of the Detailed
 Summary (Page 2))

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ailes Communications, Inc. c/o Roger Ailes 456 W. 43rd Street New York, NY 10036		11-02-84	6000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
		6000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date—\$	
SUBTOTAL of Receipts This Page (optional)			6000.00
TOTAL This Period (last page this line number only)			6000.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
(Use separate schedule for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

NRSC
c/o Mitch Daniels, Exec. Dir.
404 C. Street, N.E.
Washington, DC 20002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-07-84

13815.00

Occupation

Aggregate Year-to-Date-\$ 13815.00

B. Full Name, Mailing Address and ZIP Code

Liberty National Bank
417 W. Jefferson Street
Louisville, KY 40202

Receipt For: ☐ Primary ☒ General
☐ Other (specify): Interest

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-2-84

167.57

Occupation

Aggregate Year-to-Date-\$ 12042.24

C. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

13,982.57

TOTAL This Period (last page this line number only)

13,982.57

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 10 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	128.98
B. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-15-84	108.53
C. Full Name, Mailing Address and ZIP Code Mr. Joseph G. Schiff 1708 Clayton Road Louisville, KY 40204	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-19-84	188.10
D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apt. 715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-25-84	131.72
E. Full Name, Mailing Address and ZIP Code Mr. Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	68.68
F. Full Name, Mailing Address and ZIP Code Ms. Donna Cottrell 49 Place Janue Louisville, KY 40203	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	113.90
G. Full Name, Mailing Address and ZIP Code Treasurer KY Unemployment Ins. Frankfort, KY 40621	Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-31-84	350.15
H. Full Name, Mailing Address and ZIP Code Ms. Susan Hill 2825 Lexington Road Louisville, Ky 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	\$117.25
I. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-02-84	200.00
SUBTOTAL of Disbursements This Page (optional)			1407.31
TOTAL This Period (last page this line number only)			

SCHEDULE B
ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	49.02
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WKYQ-FM/WKYX-AM P. O. Box 2397 Paducah, KY 42001	Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	249.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	1061.69
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center P. O. Box 1679 Louisville, KY 40201	Furniture rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-04-84	285.86
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P. O. Box 50190 Indianapolis, In 46250	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-31-84	30097.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT & T Information Systems 9300 Shelbyville Road Louisville, KY 40222	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-06-84	719.88
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Paul Reid 107 Finley Louisville, KY 40220	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	113.90
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40292	Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-04-84	48.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	459.61
SUBTOTAL of Disbursements This Page (optional)			33083.96
TOTAL This Period (last page this line number only)			

84020280968

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	103.20
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	58.63
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Theresa Coble 2825 Lexington Road Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	82.08
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Treasurer KY Unemployment Ins. Frankfort, KY 40621	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-31-84	8.32
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	37.61
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Hill 2825 Lexington Road Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	117.25
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-15-84	97.69
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WVLK-FM Box 1559 Lexington, KY 40592	Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	360.40
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-15-84	1061.69
SUBTOTAL of Disbursements This Page (optional)			1926.87
TOTAL This Period (last page this line number only)			

84020230969

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-22-84	Amount of Each Disbursement This Period 287.19
B. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/02/84	Amount of Each Disbursement This Period 35665.63
C. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/04/84	Amount of Each Disbursement This Period 634.20
D. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley, #P-5 Louisville, KY 40220	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/3/84	Amount of Each Disbursement This Period 93.80
E. Full Name, Mailing Address and ZIP Code Big Red Q Quick Print 3415 Bardstown Road Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/4/84	Amount of Each Disbursement This Period 85.04
F. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/4/84	Amount of Each Disbursement This Period 43.26
G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, #715 Louisville, KY 40218	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/9/84	Amount of Each Disbursement This Period 301.89
H. Full Name, Mailing Address and ZIP Code Mr. Mark Stambaugh 146 Grace Ct., #10 Covington, KY 41017	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/25/84	Amount of Each Disbursement This Period 134.00
I. Full Name, Mailing Address and ZIP Code Ms. Theresa Coble 2825 Lexington Road Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/3/84	Amount of Each Disbursement This Period 128.98
SUBTOTAL of Disbursements This Page (optional)			37373.99
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Federal Express Corporation P. O. Box 727, Dept. A Memphis, TN 38194	Purpose of Disbursement Delivery Charges	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/6/84	273.50
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/15/84	50.00
C. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232	Purpose of Disbursement Checkbook Charge	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/84	14.75
D. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204	Purpose of Disbursement Bonus	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/19/84	10000.00
E. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/84	42.49
F. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/4/84	5900.00
G. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/84	16700.00
H. Full Name, Mailing Address and ZIP Code Ms. Anita M. Rider 2700 Glenway Avenue Cincinnati, OH 45204	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/84	40.20
I. Full Name, Mailing Address and ZIP Code Mr. Craig L. Brandts 2700 Glenway Avenue Cincinnati, OH 45204	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/84	40.20
SUBTOTAL of Disbursements This Page (optional)			33061.14
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
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Name of Committee (In Full)
 McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220	Purpose of Disbursement Salary	Date (month, day, year) 11/15/84	Amount of Each Disbursement This Period 459.61	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, #715 Louisville, KY 40218	Purpose of Disbursement Salary	Date (month, day, year) 11/9/84	Amount of Each Disbursement This Period 103.20	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Mr. Todd Smith 2825 Lexington Rd., #3361 Louisville, KY 40280	Purpose of Disbursement Contract Labor	Date (month, day, year) 10/22/84	Amount of Each Disbursement This Period 115.58	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year) 10/18/84	Amount of Each Disbursement This Period 500.00	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223	Purpose of Disbursement Salary	Date (month, day, year) 10/30/84	Amount of Each Disbursement This Period 284.48	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental	Date (month, day, year) 10/22/84	Amount of Each Disbursement This Period 3873.00	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code WDNS-FM/WKCT-AM 804 College Bowling Green, KY 42101	Purpose of Disbursement Radio Time	Date (month, day, year) 11/3/84	Amount of Each Disbursement This Period 230.00	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
H. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232	Purpose of Disbursement Payroll Taxes	Date (month, day, year) 10/30/84	Amount of Each Disbursement This Period 96.45	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
I. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage	Date (month, day, year) 11/26/84	Amount of Each Disbursement This Period 50.00	
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Disbursements This Page (optional)			5712.32	
TOTAL This Period (last page this line number only)				

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code WSEK-FM/WSFC-AM Box 740 Somerset, KY 42501	Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/3/84	Amount of Each Disbursement This Period 374.50
B. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/31/84	Amount of Each Disbursement This Period 127.15
C. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford Ct. #847 Louisville, KY 40291	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/30/84	Amount of Each Disbursement This Period 514.17
D. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036	Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/25/84	Amount of Each Disbursement This Period 7056.00
E. Full Name, Mailing Address and ZIP Code Mr. James A. Rankin R#1 Box 116 Warsaw, KY 41095	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/3/84	Amount of Each Disbursement This Period 350.00
F. Full Name, Mailing Address and ZIP Code Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/25/84	Amount of Each Disbursement This Period 107.20
G. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-22-84	Amount of Each Disbursement This Period 56.58
H. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Parkway Jeffersontown, KY 40299	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 90.72
I. Full Name, Mailing Address and ZIP Code Mr. Tod Smith Box 3361 Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 117.25
SUBTOTAL of Disbursements This Page (optional)			8793.57
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-18-84	500.00
B. Full Name, Mailing Address and ZIP Code Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	200.75
C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-24-84	200.00
D. Full Name, Mailing Address and ZIP Code Kentucky Press Service Inc. 332 Capitol Avenue Frankfort, KY 40601	Purpose of Disbursement Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	89.90
E. Full Name, Mailing Address and ZIP Code WLBj-AM&FM 689 Scott Lane Bowling Green, KY 42101	Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	327.25
F. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232	Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-04-84	4045.89
G. Full Name, Mailing Address and ZIP Code WLAP-AM&FM Box 11670 Lexington, KY 40577	Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	1020.00
H. Full Name, Mailing Address and ZIP Code Moseley Photography 140 N. Fourth Street Louisville, KY 40202	Purpose of Disbursement Photography Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-04-84	64.00
I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16 Vieux Carre Apts. Louisville, KY 40222	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-07-84	121.00
SUBTOTAL of Disbursements This Page (optional)			6568.69
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
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 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt. 847 Louisville, KY 40291	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-02-84	39.00
B. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036	Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	8327.00 9632.00
C. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	1127.70
D. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, Ky 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	88.45
E. Full Name, Mailing Address and ZIP Code Datapoint Corporation P. O. Box 93192 Chicago, IL 60673	Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-06-84	7388.53
F. Full Name, Mailing Address and ZIP Code D. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-23-84	400.00
G. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-31-84	1548.43
H. Full Name, Mailing Address and ZIP Code WHAS-AM 520 W. Chestnut Louisville, KY 40202	Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	590.75
I. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	35.18
SUBTOTAL of Disbursements This Page (optional)			20850.04
TOTAL This Period (last page this line number only)			

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ITEMIZED DISBURSEMENTS

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Summary Page)

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Name of Committee (in Full)
McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Performance Business Forms P. O. Box 100770 Nashville, TN 37210	Purpose of Disbursement Office Supplies	Date (month, day, year) 11-04-84	Amount of Each Disbursement This Period 649.25
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Purpose of Disbursement Salary	Date (month, day, year) 11-15-84	Amount of Each Disbursement This Period 514.17
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code Allen-Martin Video Prod. 9701 Taylorsville Road Jeffersontown, KY 40299	Purpose of Disbursement Dubbing Tapes	Date (month, day, year) 11-04-84	Amount of Each Disbursement This Period 95.10
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 156.85
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220	Purpose of Disbursement Travel Reimbursement	Date (month, day, year) 10-31-84	Amount of Each Disbursement This Period 135.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking Fund 617 W. Jefferson Street Louisville, Ky 40202	Purpose of Disbursement Payroll Taxes	Date (month, day, year) 10-31-84	Amount of Each Disbursement This Period 850.84
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Avenue Louisville, Ky 40205	Purpose of Disbursement Salary	Date (month, day, year) 10-30-84	Amount of Each Disbursement This Period 92.27
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, Ky 40201	Purpose of Disbursement Postage	Date (month, day, year) 10-26-84	Amount of Each Disbursement This Period 100.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Purpose of Disbursement Contract Labor	Date (month, day, year) 10-30-84	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			3093.48
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601	Purpose of Disbursement Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-04-84	Amount of Each Disbursement This Period 3.40
B. Full Name, Mailing Address and ZIP Code WSTO-FM/WVJS-AM Box 1828 Owensboro, KY 42301	Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 458.00
C. Full Name, Mailing Address and ZIP Code WAMZ-FM 520 W. Chestnut Louisville, KY 40202	Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 850.00
D. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280	Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 46.90
E. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	Purpose of Disbursement Office equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 347.97
F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt. 847 Louisville, KY 40291	Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-20-84	Amount of Each Disbursement This Period 177.28
G. Full Name, Mailing Address and ZIP Code Americall, Louisville 1000 Shelbyville Road Suite 110 Anchorage, KY 40223	Purpose of Disbursement Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-04-84	Amount of Each Disbursement This Period 745.79
H. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 1189.61
I. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 15.00
SUBTOTAL of Disbursements This Page (optional)			3833.95
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
(Use separate Schedules for each category of the Detailed Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Commissioners of the Sinking Fund 617 West Jefferson Street Louisville, KY 40202	Payroll Taxes	10-31-84	79.52
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205	Expense Reimbursement	10-30-84	12.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Express Press 4400 Bishop Lane Louisville, KY 40218	Printing	10-19-84	197.35
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U.S. Postmaster Louisville, KY 40201	Postage	10-31-84	260.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Terry Wallingford 3974 Yearling Court Cincinnati, OH 45211	Contract Labor	10-25-84	102.18
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
WBKR-FM/WOMI-AM 3121 Frederica Owensboro, KY 42301	Radio Time	11-03-84	722.50
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Mr. Steve Mobley 7104 Bearcrkke, A-3 Louisville, KY 40207	Salary	10-30-84	790.42
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
WAKY/WVEZ 558 S. Fourth Avenue Louisville, KY 40202	Radio Time	11-03-84	1020.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Media	10-22-84	57000.00
SUBTOTAL of Disbursements This Page (optional)			60183.97
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 4481.31
B. Full Name, Mailing Address and ZIP Code Americall, Louisville 10000 Shelbyville Road Anchorage, KY 40223	Purpose of Disbursement Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-06-84	Amount of Each Disbursement This Period 1069.12
C. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232	Purpose of Disbursement phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-19-84	Amount of Each Disbursement This Period 990.06
D. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers 433 East Market Street Louisville, KY 40202	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 725.69
E. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-09-84	Amount of Each Disbursement This Period 1127.70
F. Full Name, Mailing Address and ZIP Code Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 110.00
G. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-03-84	Amount of Each Disbursement This Period 153.62
H. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-23-84	Amount of Each Disbursement This Period 290.22
I. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11-01-84	Amount of Each Disbursement This Period 500.00
SUBTOTAL of Disbursements This Page (optional)			9447.72
TOTAL This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Beck Worchester 2831 Bexley Court Louisville, KY 40206	Contract Labor	10-22-84	117.25
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WPAD/Am/WDDJ/FM P. O. Box 450 Paducah, KY 42001	Radio Time	11-03-84	520.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Salary	11-15-84	790.42
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WCII-AM/WKJJ-FM 307 Muhammad Ali Blvd. Louisville, KY 40202	Radio Time	11-03-84	1436.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN	Media	10-24-84	28000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes P. O. Box 38390 Louisville, KY 40233	Office Equipment	11-04-84	270.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218	Salary	10-30-84	108.53
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P. O. Box 32440 Louisville, KY 40232	Phones	10-30-84	1541.89
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Conti Company P. O. Box 18289	Office Supplies	11-04-84	62.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			32846.59
TOTAL This Period (last page, this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Donna Cottrell 49 Place Janue Louisville, KY 40203	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	103.01
Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-15-84	92.27
Express Press 4400 Bishop Lane Louisville, Ky 40218	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	89.72
U. S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-01-84	200.00
Ms. Victoria Hensley 11 Mason Court Villa Hills, KY 41016	Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-25-84	40.20
Ms. Becky Worchester 2831 Bexley Court Louisville, KY 40206	Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	117.25
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, Ky 40205	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-30-84	97.69
WDXR-AM 1 Executive Blvd. Paducah, KY 42001	Radio Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-03-84	256.00
Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207	Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-20-84	318.53
SUBTOTAL of Disbursements This Page (optional)			1314.67
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 16 of 16 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Natl. Rep. Sen. Committee 404 C. Street, N.E. Washington, D.C. 20002	Purpose of Disbursement Reimburse for Expenses	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-31-84	12999.00
B. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	Purpose of Disbursement Media	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	38243.00
C. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291	Purpose of Disbursement Contract Labor	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-22-84	113.06
D. Full Name, Mailing Address and ZIP Code Mr. Duffy L. Ford 200 South Second Street Richmond, KY 40475	Purpose of Disbursement In-Kind-Advertising	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	249.10
E. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059	Purpose of Disbursement In-Kind-Campaign Car	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	50.00
F. Full Name, Mailing Address and ZIP Code Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243	Purpose of Disbursement In-Kind-Office Equipment	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	87.50
G. Full Name, Mailing Address and ZIP Code Mrs. Joyce Kincer 15025 Bircham Road Louisville, KY 40243	Purpose of Disbursement In-Kind-Office Equipment	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10-26-84	137.50
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			51879.16
TOTAL This Period (last page this line number only)			311377.43

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 19(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	Loan Repayment	11-19-84	15000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			15000.00
TOTAL This Period (last page this line number only)			15000.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 20(a)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. J. H. Thornton Route 4 Iron Works Pike Georgetown, KY 40324	Refund for over over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-84	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. J. N. Clevenger 6536 High Drive Mission Hills, KS 66208	refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-84	1000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Mary E. Dudla 34 Werner Road Clifton Park, NY 12065	refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-84	1000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Gene LaCroix 1700 Park Shore Road LaGrange, Ky 40031	refund for over contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-84	590.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sarah Korein 240 Central Park New York, NY 10019	refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-26-84 11-26-84	100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			3 690.00
TOTAL This Period (last page this line number only)			3 690.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 21
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Western Union Telegraph Co. P. O. Box 101250 Atlanta, GA 30392	Telegrams Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-06-84	13815.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			13,815.00
TOTAL This Period (list page this line number only)			13,815.00

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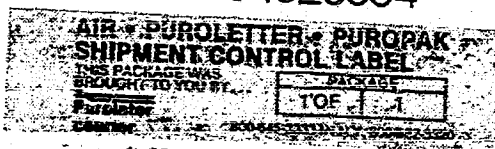
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COLLECT

038-34328534



FIRST CLASS MAIL

TOUCHE ROSS & CO.
510 WEST BROADWAY
LOUISVILLE, KY. 40202

TO:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

HAND DELIVERED _____
Date of Receipt _____

INSIDE MAIL _____
Date of Receipt _____

RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____
Date of Receipt _____

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date Of Receipt _____

FIRST CLASS MAIL POSTMARKED _____

REGISTERED/CERTIFIED MAIL POSTMARK _____

✓ NO POSTMARK _____

POSTMARK ILLEGIBLE _____

OTHER _____ POSTMARK _____

AND OR DATE OF RECEIPT _____



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

JAN 3 1985

RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: 30 Day Post-General Report (10/18/84-11/26/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

(Summary Page)

ALIGN AREA RECEIVED: CLERK OF THE SENATE	
1. Name of Committee (in Full) McConnell Senate Committee	2. FEC Identification Number C00155051
Address (Number and Street) P. O. Box 1496	3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
City, State and Zip Code Louisville, Kentucky 40201	<input type="checkbox"/> Check if address is different than previously reported HAND DELIVERED

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____
<input checked="" type="checkbox"/> January 31 Year End Report	_____ in the State of _____
<input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for — ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11-27-84</u> through <u>12-31-84</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (From Line 11 (e))	49,361	1,147,625
(b) Total Contribution Refunds (from Line 20 (d)).	0	5,014
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	49,361	1,142,611
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).	46,689	1,524,686
(b) Total Offsets to Operating Expenditures (from Line 14).	0	6,579
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	46,689	1,518,107
8. Cash on Hand at Close of Reporting Period (from Line 27)	27,443	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D).	0	
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D).	36,378	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg
Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

1-29-85
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

	FEC FORM 3 (3/80)
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Total Receipts Since Inception - \$1,839,798

06200205

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in Full)		Report Covering the Period		
McConnell Senate Committee		From: 11-27-84	To: 12-31-84	
		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
I. RECEIPTS				
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees		7,889	940,855	11 (a)
(Memo Entry Unitized \$ 2,934)				
(b) Political Party Committees			8,814	11 (b)
(c) Other Political Committees		41,472	197,956	11 (c)
(d) The Candidate				11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		49,361	1,147,625	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				12
13. LOANS:				
(a) Made or Guaranteed by the Candidate			40,000	13 (a)
(b) All Other Loans				13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b)).			40,000	13 (c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			6,579	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)		1	26,361	15
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)		49,362	1,220,565	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		46,689	1,524,686	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES				18
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate			40,000	19 (a)
(b) Of All Other Loans				19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)).			40,000	19 (c)
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees			4,014	20 (a)
(b) Political Party Committees				20 (b)
(c) Other Political Committees			1,000	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))			5,014	20 (d)
21. OTHER DISBURSEMENTS			13,815	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)		46,689	1,583,515	22
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$		24,770	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$		49,362	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$		74,132	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$		46,689	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) \$			27,443	27

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 W. 43rd Street New York, NY 10036	25,000			25,000
Nature of Debt (Purpose): Communications Training				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Senator Mitch McConnell 120 Russell Senate Office Bldg. Washington, D.C. 20510	908		908	
Nature of Debt (Purpose): Airplane Tickets				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232	2,565	1,373	3,938	
Nature of Debt (Purpose): Telephone Service				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor K. S. Air, Inc. P. O. Box 7183 Louisville, KY 40207	833	487	1,320	
Nature of Debt (Purpose): Airplane Tickets				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233	696		696	
Nature of Debt (Purpose): Office Equipment Rental				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116	2,097		2,097	
Nature of Debt (Purpose): Travel Reimbursement				
1) SUBTOTALS This Period This Page (optional)				25,000
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

9502002001

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
McConnell Senate Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202	3,847		3,847	
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250	4,138	7,240		11,378
Nature of Debt (Purpose): Media				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				11,378
2) TOTAL This Period (last page this line only)				36,378
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				36,378

95020020302

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full) McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mr. Donald Geary 1501 E. Second P. O. Drawer D Centralia, IL 62801		Name of Employer Geary Construction Co. Occupation Owner	Date (month, day, year) 12-05-84 Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Wade H. Jefferson, III 400 East Main Street Lexington, KY 40507		Name of Employer self Occupation Real Estate	Date (month, day, year) 11-29-84 Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Mr. James H. Adams 1545 Wilshire Boulevard Los Angeles, CA 90017		Name of Employer self Occupation real estate	Date (month, day, year) 12-05-84 Amount of Each Receipt This Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 280.00	
D. Full Name, Mailing Address and ZIP Code Mr. G. E. Taylor P. O. Box 575 Bridgeport, TX 76026		Name of Employer none Occupation self employed	Date (month, day, year) 11-29-84 Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 350.00	
E. Full Name, Mailing Address and ZIP Code Mr. Henry Upham Harris 55 Brookville Road Glen Head, NY 11545		Name of Employer none Occupation Retired	Date (month, day, year) 12-13-84 Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 300.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Joyce Kincer 15025 Bircham Road Louisville, KY 40243		Name of Employer STM Occupation executive secretary	Date (month, day, year) 12-31-84 Amount of Each Receipt This Period 450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 587.50	
G. Full Name, Mailing Address and ZIP Code Mr. James H. Barr 218 Choctaw Road Louisville, KY 40207		Name of Employer Federal Government Occupation U. S. Attorney	Date (month, day, year) 12-05-84 Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date--\$ 350.00	
SUBTOTAL of Receipts This Page (optional)			1030.00
TOTAL This Period (last page this line number only)			

850200203

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 3 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code Mrs. Lillian A. Hart Route 2 Falmouth, KY 41040	Name of Employer USDA-ASES	Date (month, day, year) 11-27-84	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation St. Director	Aggregate Year-to-Date—\$ 280.00	
B. Full Name, Mailing Address and ZIP Code Mr. Walker Peddicord 860 Broadmoor Court Lafayette, CA 94549	Name of Employer none	Date (month, day, year) 12-05-84	Amount of Each Receipt This Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date—\$ 205.00	
C. Full Name, Mailing Address and ZIP Code Mr. Charles H. Brunie 1 New York Plaza New York, NY 10004	Name of Employer Oppenheimer Capital Corp.	Date (month, day, year) 12-05-84	Amount of Each Receipt This Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation chairman	Aggregate Year-to-Date—\$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Dr. Daryl Harvey Route 6, Box 1-C Glasgow, KY 42141	Name of Employer self	Date (month, day, year) 11-27-84	Amount of Each Receipt This Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M. D.	Aggregate Year-to-Date—\$ 280.00	
E. Full Name, Mailing Address and ZIP Code Mr. W. B. Lawton Route 5, Box 3610 Sulphur, LA 70663	Name of Employer Self-Employed	Date (month, day, year) 11-27-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	Aggregate Year-to-Date—\$ 275.00	
F. Full Name, Mailing Address and ZIP Code Dr. George F. Hromyak, Jr. 801 Browns Ferry Road Frankfort, KY 40601	Name of Employer self	Date (month, day, year) 11-30-84	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Radiologist	Aggregate Year-to-Date—\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mr. O. H. Delchamps, Jr. P.O. 1668 Mobile, AL 36601	Name of Employer Delchamps, Inc.	Date (month, day, year) 12-05-84	Amount of Each Receipt This Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corp Exec.	Aggregate Year-to-Date—\$ 300.00	
SUBTOTAL of Receipts This Page (optional)			1335.00
TOTAL This Period (last page this line number only)			

85020020304

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Robert J. McCallum
 5758 Chester Court

Mobile, AL 36609

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Delchamps, Inc.

Date (month,
 day, year)

11-27-84

Amount of Each
 Receipt this Period

30.00

Occupation

executive

Aggregate Year-to-Date-\$

230.00

B. Full Name, Mailing Address and ZIP Code

Mr. Caldwell R. Willig
 1800 Mayo Lane

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

ITS, Inc.

Date (month,
 day, year)

12-13-84

Amount of Each
 Receipt This Period

1000.00

Occupation

executive

Aggregate Year-to-Date-\$

1100.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Edna C. Edmondson
 1709 Beverly Hills St.

Norman, OK 73069

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

12-05-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Judge Henry Meigs
 417 Wapping Street

Frankfort, KY 40601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

12-13-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Michael Schwartz
 15 Newkirk Avenue

East Rockaway, NY 11518

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

L. F. Rothschild, Unterberg, Ton

Date (month,
 day, year)

12-04-84

Amount of Each
 Receipt This Period

250.00

Occupation

Partner, Managing Director

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. William T. Wright
 11800 124th Ave., NE

Kirkland, WA 98033

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

12-20-84

Amount of Each
 Receipt This Period

30.00

Occupation

Auto Dealer

Aggregate Year-to-Date-\$

230.00

G. Full Name, Mailing Address and ZIP Code

Mr. Robert Yoder
 Route 1, Box 169

Guthrie, KY 42234

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
 day, year)

12-05-84

Amount of Each
 Receipt This Period

30.00

Occupation

Farmer

Aggregate Year-to-Date-\$

205.00

SUBTOTAL of Receipts This Page (optional)

2590.00

TOTAL This Period (last page this line number only)

4955.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 5 for
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 (Use separate schedule(s) for each
 category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

National Restaurant Association
311 First Street, N.W.

Washington, DC 20001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

12-13-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

TORCHMARK Corporation (PAC)
c/o R. K. Richey, President
2001 Third Avenue South
Birmingham, AL 35233

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-20-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

C. Full Name, Mailing Address and ZIP Code

HI/PAC Holliday Inns, Inc.
c/o Richard Ashman, Treasurer
3742 Lamar Avenue
Memphis, TN 38195

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-10-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Jerrico Political Action Com.
101 Jerrico Drive

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-13-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Nursery Industry PAC
c/o John S. Satagaj, Director
1250 I St., N. W. Suite 500
Washington, DC 20005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-30-84

100.00

Occupation

Aggregate Year-to-Date-\$ 100.00

F. Full Name, Mailing Address and ZIP Code

BankPac
c/o Mr. Brian Meyer, Treasurer
1120 Connecticut Avenue, N.W.
Washington, DC 20036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-29-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

G. Full Name, Mailing Address and ZIP Code

O'Melveny & Myers PAC
c/o Mr. Donald T. Bliss
1800 M Street, N.W.
Washington, DC 20036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-05-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

9502002006

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 5 for
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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

The Kroger Better Govt.Com.(PAC)
 c/o Jack Partridge, Jr., V.P.
 1014 Vine Street
 Cincinnati, OH 45201

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

12-05-84

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

King Ranch Inc. PAC-Federal
 c/o W. E. Sellers
 P. O. Box 1418
 Kingsville, TX 78363

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-05-84

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

The Loews/Lorillard Pub.Aff.Com.
 c/o Mr. Arthur J. Stevens, Chair
 666 Fifth Avenue
 New York, NY 10019

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-11-84

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

PepsiCo Concerned Citizens Fund
 c/o Max L. Friedersdorf
 Purchase, NY 10577

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-20-84

200.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 200.00

E. Full Name, Mailing Address and ZIP Code

The Tobacco Institute PAC
 c/o Ralph Vinovich, Vice Pres.
 1875 Eye St., N.W., Suite 800
 Washington, DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-11-84

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

COALPAC
 c/o Mr. Carl E. Bagge, President
 1130 17th Street, N.W.
 Washington, DC 20036

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-20-84

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Phillip Morris PAC
 120 Park Avenue
 New York, NY 10017

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

12-20-84

5000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 5000.00

SUBTOTAL of Receipts This Page (optional) 10200.00

TOTAL This Period (last page this line number only)

7
0
0
2
0
0
0
2
0
0
0
7

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 5 for
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Oil Pol. Awareness Fund c/o Mr. H. P. Shawlee, Chairman Room M-01, 461 S. Boylston Street Los Angeles, CA 90017		12-13-84	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chevron PAC 225 Bush Street Room 1706 San Francisco, CA 94104		12-20-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
I Love America Committee 303-6th Street Lynchburg, VA 24504		12-31-84	2420.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		In-Kind Postage
	Aggregate Year-to-Date—\$	4051.82	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MEBA Political Action Fund 444 North Capitol Street Suite 800 Washington, DC 20001		12-20-84	2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	2500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
R.P.A.C. c/o Mr. Jack Carlson 430 North Michigan Avenue Chicago, IL 60611		12-11-84	5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	8000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wholesale-Distributor PAC c/o Nicholas E. Calio, Exec. Dir. 1725 K Street, Northwest Washington, DC 20006		12-10-84	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date—\$	1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
I Love America Committee 303-6th Street Lynchburg, VA 24504		12-31-84	1431.82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		In-Kind Printing-Stationery
	Aggregate Year-to-Date—\$	4051.82	
SUBTOTAL of Receipts This Page (optional)			15351.82
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 5 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ryder Com. for Effective Govt.
 C/O Daniel K. O'Connell, Chair.
 P. O. Box 520816
 Miami, FL 33152

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

12-11-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Independent Ins. Agents Of
 America, Inc. PAC
 600 Pennsylvania Ave, SE Ste. 200
 Washington, DC 20003

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

12-13-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

FED PAC
 c/o Ms. Cindy Williams
 1111 19th Street, N.W.
 Washington, DC 20036

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

12-11-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Interstate Natural Gas Assoc.
 C/O Jerry Verkler, Treasurer
 1660 L. Street, N.W. Suite 601
 Washington, DC 20036

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

12-20-84

250.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Morrison's Political Action Com.
 c/o Pfilip G. Hunt, Chairman
 P. O. Box 160266
 Mobile, AL 36625

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

12-20-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Sunbelt Good Govt. Com/Winn-Dixie
 c/o Mr. Glen P. Woodard
 Box "B"
 Jacksonville, FL 32203

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

12-20-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Fund for a Conservative Majority
 Mr. Robert C. Heckman, Chairman
 302 Fifth Street, N.E.
 Washington, D.C. 20002

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-18-84

234.63

11- 6-84

10.00

Occupation

In Kind - Printing

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$ 3,771.59

SUBTOTAL of Receipts This Page (optional)

4994.63

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 5 for
LINE NUMBER II(c)
 (Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Printing Industries of America PAC
 1730 North Lynn Street
 Arlington, VA 22209

Name of Employer

Date (month,
 day, year)
 12-11-84
 In kind

Amount of Each
 Receipt this Period
 826.17
 Luncheon

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date—\$826.17

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

826.17

TOTAL This Period (last page this line number only)

41,472.62

9502002010

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

12-04-84

Amount of Each
Receipt this Period

.77

Aggregate Year-to-Date—\$ 12043.01

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

JB TOTAL of Receipts This Page (optional)

.77

s Period (last page this line number only)

.77

8502002031

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	388.36
B. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194	Purpose of Disbursement Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	33.00
C. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218	Purpose of Disbursement salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	434.15
D. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233	Purpose of Disbursement Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	695.94
E. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	459.61
F. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	Purpose of Disbursement Bulk Rate Permit Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	115.00
G. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222	Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	416.00
H. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-14-84	388.36
I. Full Name, Mailing Address and ZIP Code Paversham World Travel 2843 Brownsboro Road Louisville, KY 40206	Purpose of Disbursement travel Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-17-84	510.00
SUBTOTAL of Disbursements This Page (optional)			3440.42
TOTAL This Period (on page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Liberty National Bank P.O. Box 32500 Louisville, KY 40232	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	2938.40
B. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	514.17
C. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-14-84	459.61
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201	postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	5000.00
E. Full Name, Mailing Address and ZIP Code Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299	Dubs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	28.00
F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218	salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	388.36
G. Full Name, Mailing Address and ZIP Code Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	2096.52
H. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202	Plane Fare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-10-84	330.00
I. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-14-84	514.17
SUBTOTAL of Disbursements This Page (optional)			12269.23
TOTAL This Period (use page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220	salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	459.61
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	1420.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299	Radio Production Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	341.31
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Copy Corp. 10420 Bluegrass Pkwy. Jeffersontown, KY 40299	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	31.88
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	202.90
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	425.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291	salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	514.17
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
State Farm Insurance 760 N.W. Broad Street Murfreesboro, TN 37131	Insurance Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-05-84	25.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291	Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-03-84	250.00
SUBTOTAL of Disbursements This Page (optional)			3669.87
TOTAL This Period (on page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code Americall, Louisville 10000 Shelbyville Rd Suite 110 Anchorage, KY 40223	Purpose of Disbursement phones	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-17-84	1288.78
B. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	832.61
C. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204	Purpose of Disbursement Expense Reimburse- ment	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-03-84	179.60
D. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218	Purpose of Disbursement Rent	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	2024.69
E. Full Name, Mailing Address and ZIP Code WHAS-AM 520 W. Chestnut Louisville, KY 40202	Purpose of Disbursement Production	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	60.00
F. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Purpose of Disbursement Salary	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	434.15
G. Full Name, Mailing Address and ZIP Code Columbia Press, Inc. P. O. Box 346 Columus, IN 47202	Purpose of Disbursement Printing	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	3180.00
H. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220	Purpose of Disbursement Airplane Rental	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	487.50
I. Full Name, Mailing Address and ZIP Code Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	Purpose of Disbursement travel reimbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-17-84	908.00
SUBTOTAL of Disbursements This Page (optional)			9395.33
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Jack Prewitt P.O. Box 206 Liberty, KY 42539	Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	100.00
Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-14-84	434.15
Columbia Press, Inc. P. O. Box 346 Columus, IN 47202	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	667.15
Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601	clipping service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-17-84	176.63
Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202	travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-17-84	72.50
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-05-84	1624.83
Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	54.00
Xerox 1250 Fairwood Ave. Columbus, OH 43267	Maintenance Agreement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	382.47
Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	122.01
SUBTOTAL of Disbursements This Page (optional)			3633.74
TOTAL This Period (last page this line number only)			

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Druskin Greyhound Printing Co. 47 Glenwood Avenue Minneapolis, MN 55403	printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-21-84	473.82
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601	Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	239.22
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Morgan Equipment Company P.O. Box 7802 San Francisco, CA 94120	Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-19-84	320.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Central Bell P.O. Box 32440 Louisville, KY 40232	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-13-84	939.90
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Louisville, KY 40201	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-03-84	300.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	36.23
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Express Press 4400 Bishop Lane Louisville, KY 40218	printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	2741.34
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11-30-84	390.76
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201	Furniture Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-20-84	285.86
SUBTOTAL of Disbursements This Page (optional)			5727.13
TOTAL This Period (on page this line number only)			

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

South Central Bell
 P.O. Box 32440

Purpose of Disbursement

Phones

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-13-84

74.29

☐ Other (specify):

Louisville, KY 40232

B. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement

Postage

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-03-84

300.00

☐ Other (specify):

Louisville, KY 40201

C. Full Name, Mailing Address and ZIP Code

John Conti Company
 P.O. Box 18289

Purpose of Disbursement

Office Supplies

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-13-84

62.00

☐ Other (specify):

Louisville, KY 40218

D. Full Name, Mailing Address and ZIP Code

Federal Express Corporation
 P.O. Box 727 Dept A

Purpose of Disbursement

Delivery Charges

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-10-84

20.50

☐ Other (specify):

Memphis, TN 38194

E. Full Name, Mailing Address and ZIP Code

Ms. Sara Kent Lemonds
 2326 Broadmeade Road

Purpose of Disbursement

Salary

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-14-84

390.76

☐ Other (specify):

Louisville, KY 40205

F. Full Name, Mailing Address and ZIP Code

Performance Business Forms
 P.O. Box 100770

Purpose of Disbursement

Office Supplies

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-13-84

399.00

☐ Other (specify):

Nashville, TN 37210

G. Full Name, Mailing Address and ZIP Code

South Central Bell
 P.O. Box 32440

Purpose of Disbursement

Phones

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-20-84

1298.59

☐ Other (specify):

Louisville, KY 40232

H. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement

Postage

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-03-84

50.00

☐ Other (specify):

Louisville, KY 40201

I. Full Name, Mailing Address and ZIP Code

I Love America Committee
 303-6th Street

Purpose of Disbursement

In-Kind
PostageDate (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☒ General

12-31-84

2420.00

☐ Other (specify):

Lynchburg, VA 24504

SUBTOTAL of Disbursements This Page (optional)

5015.14

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Name of Committee (in Full)			
McConnell Senate Committee			
A. Full Name, Mailing Address and ZIP Code I Love America Committee 303-6th Street Lynchburg, VA 24504	Purpose of Disbursement In-Kind Printing-Stationery Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-31-84	Amount of Each Disbursement This Period 1431.82
B. Full Name, Mailing Address and ZIP Code Mrs. Joyce Kincer 15025 Bircham Road Louisville, KY 40243	Purpose of Disbursement In-Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-31-84	Amount of Each Disbursement This Period 450.00
C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-21-84	Amount of Each Disbursement This Period 390.76
D. Full Name, Mailing Address and ZIP Code Printing Industries of America PAC 1730 North Lynn Street Arlington, VA 22209	Purpose of Disbursement In-Kind Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12-11-84	Amount of Each Disbursement This Period 826.17
E. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority Mr. Robert C. Heckman, Chairman 302 Fifth Street, N.E. Washington, D.C. 20002	Purpose of Disbursement In-Kind Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10-18-84 11-6-84	Amount of Each Disbursement This Period 234.63 10.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			3,343.38
TOTAL This Period (last page this line number only)			46,494.24

ALICIA HAE FISHER
SUPERINTENDENT
HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

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